



ALBANY VOLLEYBALL ASSOCIATION

Indoor Volleyball Nomination Form 2020

Important Note:

Committee reserves the right to amend team nominations in interest of creating an even competition. If players are playing in the Mixed League as well they only need to pay the VWA player rego fee once. Please attach form with the money **TO** the **Mixed** team nomination form and **not** this form. Only attach to this form the money and registration forms for those players **ONLY** playing Men's league.

TEAM NAME :			
Competition:	<u>Premier League</u> <input type="checkbox"/> Men's <input type="checkbox"/> Women's	<u>Mixed</u> <input type="checkbox"/> Competitive <input type="checkbox"/> Social	<u>Junior</u> <input type="checkbox"/> Year 7-9 (predominantly) <input type="checkbox"/> Year 9+ (predominantly)
(Office Use Only) Paid: \$ Receipt Number: Date:			

Team Contact Person:	Mobile Ph:
Email:	Home Ph:

Team List Information		VWA Membership No.
1.	Player Name:	
2.	Player Name:	
3.	Player Name:	
4.	Player Name:	
5.	Player Name:	
6.	Player Name:	
7.	Player Name:	
8.	Player Name:	

