

Metro Volleyball Conference Team Registration Form 2009

School: _____
Address: _____

AD or Volleyball Coordinator Information

Name: _____
Address: _____
City/St/Zip: _____
E-Mail: _____
Phone: _____

Fill in Number of Teams for each grade and division (Yellow only)

Grade	5th	6th	7th A	7th B	8th A	8th B	
Girls Teams							X
TOTAL GIRLS							
Boys Teams							X
TOTAL BOYS							
Total Teams by Grade							

Registration Cost per Team \$160.00
Total Fee Due \$ -

Include check in the above amount, made out to:

Metro Volleyball Conference

Teams will *not* be guaranteed a spot without payment of team fees.
Team fees will be \$260.00 if a team is added after **August 21, 2009**.
Parishes will forfeit their team registration if a team is adropped after August 21, 2009.

Send form and check to address before due date July 27, 2009.

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Waukesha, WI 53188

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