

Blitz Tournament – Registration Form 2012

Proposed Name of the Team ***						
Team Captain ***	Name					
	Address					
	e-mail address					
	phone					
<p>Please note that, according to tournament rules, every team should:</p> <ul style="list-style-type: none"> have a minimum of 6 and a maximum of 8 players; have at least three women; have one team captain; <p>Changes to the list of players are possible if in line with the above rules and should be communicated to the blitz committee before playing the first match. Changes after the first match for the duration of the tournament should be justified and have to be approved by the tournament committee.</p>						
Team Members (to be completed with the registration OR on the first day of the tournament)						
	FIRST NAME	SURNAME	CLUB, IF ANY	DIVISION	CAPTAIN (MARK X)	GENDER (M OR W)
1						
2						
3						
4						
5						
6						
7						
8						

***= Mandatory fields.

Please enclose a **120 EURO Cheque paid to UCD volleyball Club** and send to:

UCD Volleyball Club
 Guillaume Dony
 48 Carrickmount Drive
 Rathfarnham, D14
 Dublin, Ireland