



CEVA ADULT REGIONAL CHAMPIONSHIPS 2010

Official Entry Form

ENTRY DEADLINE: APRIL 23, 2010, 5:00PM (Must be received in the CEVA office by this date.)

Entries received after April 23rd will be accepted on a space available basis.

Team Name: _____
 Team Rep: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Rep. Day Phone #: _____ Rep. Evening Phone #: _____

PLEASE CIRCLE APPROPRIATE GROUPS:

WOMEN'S

MEN'S

AA

A

BB

AA

A

BB

Entry Fee: \$115.00

PLAYERS NAMES (LAST, FIRST)	FULL MEMBERSHIP List USAV #	Uniform #
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Certified Referee: _____

Certified Scorekeeper: _____

For office use only _____ Date Recvd _____ Check # _____ Date Confirm Mailed

Payable To: CEVA – 4840 SW Western Ave., Suite 450, Beaverton, OR 97005