

CEVA NATIONAL INCENTIVE PROGRAM APPLICATION

(Deadline August 1st)

Referees or National Scorekeepers

Name:

Address:

City, State, Zip:

Tournament attended and in what capacity:

Dates and Location:

Amount paid (include copy of check stub):

For Office Use only:

Check No.:
Date:
Amount:
Approved by:

Mail to: CEVA 4840 SW Western Ave., Ste 450, Beaverton OR 97005
Fax: 503-520-0242 or email to region@columbiaempirevolleyball.com