FCCLA 6x6 Sweetheart Volleyball

Tournament Registration

$60 per team (pre-registered. Payment and registration must be received by **February 5th** to be considered pre-registered. Give registration form to an FCCLA officer, Mrs. Wales or turn into High **School Office. *Make checks payable to “Wellington Napoleon RIX”***

**Please print all information legibly; INCOMPLETE FORMS WILL NOT BE ENTERED.**

**Team Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CIRCLE ONE:    Junior (grades 6-8)                 High school (9th – 12th grade) Adult (18+ older)**

**Captain**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade               Age

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature; Parent or Guardian Signature (If under 18)

**Player 3**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade               Age
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature; Parent or Guardian Signature (If under 18)

**Player 2**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade               Age

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature; Parent or Guardian Signature (If under 18)

**Player 4**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade               Age

Signature; Parent or Guardian Signature (If under 18)

**Player 5**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade               Age

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature; Parent or Guardian Signature (If under 18)

**Player 6**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade               Age

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature; Parent or Guardian Signature (If under 18)

**Additional Sub (optional)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade               Age

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature; Parent or Guardian Signature (If under 18)

**EMAIL:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*A confirmation email and rules will be sent to your team.*

**Waiver:** Every player and parent or guardian, if player under 18, must read this WAIVER form. Signatures on the registration form signify each person has read, and understands and abides by the information. There are risks connected with my participation in this tournament and its related activities. I release and discharge Wellington-Napoleon R-IX School District and all event sponsors, and all event volunteers of any liability.