



# VOLLEYBALL CANADA

2004-2005

TEAM / PLAYER REGISTRATION FORM  
 FORMULAIRE D'INSCRIPTION POUR LES EQUIPES/JOUEURS

Telephone

Name of Club: \_\_\_\_\_ Province: \_\_\_\_\_ Home: \_\_\_\_\_

Name of Team: \_\_\_\_\_ Team Contact: \_\_\_\_\_ Business: \_\_\_\_\_

Address in Full: \_\_\_\_\_ eMail: \_\_\_\_\_

<b>Team Classification:</b>	Male/Homme	<b>Age Category:</b>	Master	Juvenile	<b>Division:</b>	A	B	C	D	E
	Female/Femme		Senior	Midget						
	Co-Ed		Junior	Bantam		<b>Category:</b> Recreation National				

Players	Surname, Name	Birthdate			Address	Phone	Signature
		Year	Month	Day			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

Team Staff	eMail	Address	City	Postal Code	Phone (Home)	(Business)
Coaches						
Manager						

Club Official: \_\_\_\_\_

Fees Paid: \_\_\_\_\_