



volleyball association of ireland

Affiliated to: FIVB, CEV, Olympic Council of Ireland

MASTERS TOURNAMENT **Saturday 19th November 2016** **ALSAA (Dublin Airport)**

PLAYER REGISTRATION FORM

Name:	
Email:	
Phone:	
<u>Please confirm the following:</u>	
I confirm that I am over 40 years of age Yes ____ No ____	
If no, I confirm that I am over 35 and not registered as a Premier League player ____	
Please complete one of the below options:	
<u>Player information</u> I want to be allocated a team Yes ____ No ____ If yes, please include your preferred playing position: _____	<u>Team information</u> I am entering as part of a team Yes ____ No ____ Team Name: _____ Team Captain: _____
Entry Fee: €5	
CLOSING DATE: 16th November 2016 Please pay via cheque or cash and send to Volleyball Association of Ireland, 141 Thomas Street, Dublin 8. Alternatively, pay via PayPal to info@volleyballireland.com	
Signed _____	Date _____