



2015 CSAA BOYS VOLLEYBALL TEAM REGISTRATION FORM

Please fill out this form completely and return to the CSAA office via e-mail to: julie@loucsaa.org or fax to 459-8420. This registration form must be received in the CSAA office by February 13, 2015.

2015 FRANCHISE FEES: 8TH & 6TH Grade Division - \$325.00 per team / 4TH Grade Division - \$250.00 per team

SCHOOL / PARISH _____

Volleyball Coordinator _____ **Primary Phone** _____

E-MAIL _____

8TH GRADE DIVISION:

We will enter _____ TEAMS in the 8th Grade Division.

#1 TEAM COACH _____

EMAIL _____ CELL PHONE _____

#2 TEAM COACH _____

EMAIL _____ CELL PHONE _____

#3 TEAM COACH _____

EMAIL _____ CELL PHONE _____

#4 TEAM COACH _____

EMAIL _____ CELL PHONE _____

6TH GRADE DIVISION:

We will enter _____ TEAMS in the 6th Grade Division.

#1 TEAM COACH _____

EMAIL _____ CELL PHONE _____

#2 TEAM COACH _____

EMAIL _____ CELL PHONE _____

#3 TEAM COACH _____

EMAIL _____ CELL PHONE _____

#4 TEAM COACH _____

EMAIL _____ CELL PHONE _____

4TH GRADE DIVISION:

We will enter _____ TEAMS in the 4th Grade Division.

#1 TEAM COACH _____

EMAIL _____ CELL PHONE _____

#2 TEAM COACH _____

EMAIL _____ CELL PHONE _____

#3 TEAM COACH _____

EMAIL _____ CELL PHONE _____

#4 TEAM COACH _____

EMAIL _____ CELL PHONE _____