

CROSS COUNTY SLAM FEST

3rd * 4th * 5th * 6th

Youth Volleyball Tournament @ Cross County Community Schools

1270 123rd Road, Stromsburg

Saturday, September 25 – Start time 9:00

OFFICIAL ENTRY FORM

Register your team by Tuesday, September 7th

\$80/team Make checks payable to: **Cross County Youth Volleyball**

Please send to: Emily Peterson PO Box 206 Stromsburg, NE 68666

Or email: emilysuz@hotmail.com

RULES AND INFORMATION TO COME AFTER REGISTRATION RECEIVED.

Pool play with tournament to follow (depends on # of registrations) *Volley-Lites for all ages

***T-shirts will be awarded for 1st Place in each division *Concessions Available**

TEAM NAME: _____

COACH: _____

COACH EMAIL: _____ PHONE: _____

DIVISION: 3rd/4th _____ 5th/6th _____

Team Roster:	Player	Grade
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____
12.	_____	_____

***Release: I understand that the Cross County Schools Volleyball Club and any volunteers of this tournament have no responsibility for, nor carry insurance for the benefit of players and coaches. Therefore, I hereby waive and release the Cross County Volleyball Club, Cross County Schools, and volunteers for this tournament from any liability for any injuries or illnesses by my team while participating in this volleyball tournament.

Coach's signature: _____

