REGISTRATION AND TEAM ROSTER		
TEAM NAME:	CONTACT/TEAM PARENT: Team Captain:	
	CITY/ST/ZIP:	
DAYTIME PH:	OTHER PH:	
CELL:	EMAIL:	
IFAM DIVINION ((Incle (Ine) IIII I/II	TEAM COMPETITIVE LEVEL (Circle One) 1 2 3 4 5 6 7 8 9 10 (1 being least competitive)	

Each team will consist of a minimum of 3 players, a maximum of 4 players.

(Only 3 on the court at a time.)

PLAYER'S FULL NAME	2016-2017 GRADE	SCHOOL DISTRICT
1.		
2.		
3.		
4.		

## Items needed to reserve your spot:

- 1. Completed Registration Form (one per team) and email to austin@skylinejuniors.com
- 2. Signed Liability Waivers (one per player)
- > All fees are non-refundable Email: austin@skylinejuniors.com with questions.
- Pools and brackets will be posted online at www.austinskylinejuniorsvolleyball.com