

Athlete Master Form			Athletes Name:										
General contact information:			Region:IOWA										
Address:			Athlete commitment: Are you interested in a Not applicable for this season										
Parent(s) Name(s):			Regional TeamNational Team										
Athlete's Date of Birth:/ Parent phone: Athlete phone:			Scrimmage t-shirt: *shirt included in tuition* Sizes:										
							Parent Email:			Cotton t-shirt:			
										Optional Spandex: Pd?(\$25):			
							Tuition payment:						
September Payment	due Aug. 30 th	\$24	0.00										
October Payment	due Sept. 27 th	\$24	0.00										
November Payment	due Oct. 25 th	\$240	0.00										
December Payment	due Nov. 29 th	\$15	0.00										
Payment Option:													

Age division:

Which way would you like to make your payments?

___cash/check ___credit card

if you choose credit card know that your card will be charged on the payment dates.

*Detach and take home for	your records and in		a	scrimmage shirt &	≩ a	size spandex	
All checks made out to: No Limits Volleyball (NLV)				*Spandex are optional*			
Payment can be mailed to:	mailed to: NLV (Kelsey Thurman)			Payments should be made on:			
	224 South Truman	Ave.		All levels:			
	Lanark, IL. 61046		Se	eptember Payment(\$2	240.00)	due Aug. 30 th	
	credit card I know that your the payment the credit card		0	ctober Payment (\$240	0.00)	due Sept. 27 th	
If you chose credit card k card will be charged on th dates. Please refer to th payment form for more d information.*				ovember Payment(\$2 ecember Payment (\$1	•	due Oct. 25 th due Nov. 29 th	
			t any tin	to covid-19 and the possibility of our season ly time, all payments will be made only on a s.*			