

Volleyball / 3-on-3 Basketball Team Entry Forms

Team Name	Gender _____ Male _____ Female	Age of Youngest Player
Coach's/Manager's Name	Phone Day ()	Age Division ___ 50+ ___ 60+ ___ 70+
Email	Phone Number Evening ()	Phone Number Fax ()
Address Street	 City	 State/Zip
Number of T-Shirts for Team (write # by each size) S _____ M _____ L _____ XL _____ XXL _____		

Team Roster - cost for team is \$50

	Name	Address	Date of Birth
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
Total Enclosed			\$

* Please fill out form and mail to: *Gainesville Sports Commission*
 300 East University Ave. Suite 100, Gainesville, FL 32601 or fax : 352-338-0600