



2018 BEACH PAIRS/FOURS TOURNAMENT Entry Form

Team Name: _____

Club/School: _____

(If applicable)

Team Contact 1: _____

Phone (BH): _____ Mobile: _____

Email: _____

Team Contact 2: _____

Phone (BH): _____ Mobile: _____

Email: _____

Please select the division you wish to enter

Men Pairs	<input type="checkbox"/>
Women Pairs	<input type="checkbox"/>
Mixed Fours	<input type="checkbox"/>

To select electronically, right click on box -> properties -> checked

Available Payment Options:

Cheque: Made payable to Volleyball ACT

Direct Deposit: Commonwealth Bank (BSB: 062-904 Acc #: 0090 5741)

Credit Card: (please note a 2% surcharge applies for all credit card transactions)

I have read the Competition Information and understand the conditions of the competition including those regarding team payment and player registration and agree to accept those conditions on behalf of my team.

Signed: _____

Date: _____

Entries close Tuesday 16 January 2018

SEND ENTRY FORMS TO: competitions@volleyballact.com.au