CAROLINA REGION/USA VOLLEYBALL OUTDOOR TOURNAMENT SANCTION REQUEST FORM



I. Tournament Director Information: II. Tournament Information

Carolina Region, USAV

Clemmons, NC 27012-1757

P.O. Box 1757

Tournament Director's (TD) Name:	Name of Tournament (Optional):		
TD's Mailing Address:	Date(s) of Tournament:		
TD's City/St/Zip:			
TD's Home Phone # (with area code):	Site(s) of Tournament (List all parks/facilities):		
TD's Work # (with area code):			
TD's Mobile # (with area code:			
TD's # to be reached day of trn (cell/pager/gym office):	Sponsor(s) of Tournament (Optional):		
TD's Fax # with area code:	Special Requests, waivers, non-tournament requests. Please be specific in		
TD's E-mail:	describing your request:		
Registration URL:			
Check all appropriate Genders, Divisions and Formats: TYPE: Juniors - Girls: 18's 16's 14's 12's Adults- Women: Open AA A BB B	Boys: 18's 16's 14's 12's Men: Open AA A BB B		
Sand Grass 2's 3's	4's 6's		
Total Number of Courts Available for Tournament:			
I hereby request sanction for the above-described tournament. In cor Carolina Region and conduct this tournament in accordance with the r Rule Book as approved and published by USA Volleyball. The Ca eligibility.	egulations of the Carolina Region and with the current Official Beach		
PRINTED NAME SIGNATUR	RE DATE		
	The tournament sanction fee if \$15 will be invoiced to the Tefore event will be posted. Send form to Region so it is receive ted after deadline may not be accepted.		

FOR OFFICE USE ONLY

office@carolinaregionvb.org

(336) 766-3501 (fax)

Date Received:	Accepted:	Denied:	rev: 7/2021
	1 <u>——</u>		