RGV JUNIOR OLYMPIC VOLLEYBALL

H.S. TEAM NAME:_____

Eligibility: (Incoming Fresh. only / Freshman / JV. or Varsity) *Circle One*

*Your own coach-NAME*_____ *Phone:*_____

Are you requesting a RGV Coach Yes or No - circle one

H.S. Hwy 83 - Power Volleyball League

TEAM ROSTER

Grade	Player's Name		Home Phone Number or Cell Phone Number	e-mail please / waiver form included
	**Team Captain		Home Cell	
			Home Cell	
			Home Cell	
			Home Cell	
			Home Cell	
			Home Cell	
			Home Cell	
			Home Cell	
			Home Cell	
			Home Cell	
			Home Cell	
			Home Cell	
			Home Cell	

Make checks payable to:
Mail money order to:

RGV HWY 83 Volleyball
905 Crown Circle // Edinburg, TX, 78539

956 380 4054 **rgvjrs.org**