Registration form "Easter Volley 2026"

Send to: eastervolleymarche@gmail.com

(principicla@gmail.com for special requests)

(fill out the form for each participating team)

Company Name: ……
City …… Province …..

Team Name:…….. Participation Category: U. ……

e-mail ……@…….

Tournament Manager Sig. ……
N° tel. ……. /…… e-mail ……@…….

Coach at the Tournament N° tel. ……./…… e-mail ……@……

Indicate member(s) authorised to use defibrillator (BLSD)……

Indicate the name of the scorekeeper (mandatory for each team)
……

Accommodation request:
Arrival day: …./…./……..

Means of arrival: ☐ Bus ☐ Minibuses-cars ■ train ☐ airplane
N°of people participating:
Coaches ……. (specify n° man/woman)
Dirigenti ……. (specify n° man/woman))
Athletes ……. Athlete T-Shirt Sizes: S …. M…….L ……XL……..

Family members: attach complete list of data