



## 10th Annual Vikings Classic Tournament

Sunday, March 24th, 2019 @ North Branch High

School Ages: 15/16's and 17/18's

Cost: \$110 per team

TEAM NAME: \_\_\_\_\_ (Team Rank in your club)

### Team Representative

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Phone

Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax \_\_\_\_\_

Email: \_\_\_\_\_  
(MUST HAVE)

### Division: (Please only one entry form for each team)

15/16's \_\_\_\_\_ 17/18's \_\_\_\_\_

A check for the amount you owe must accompany this application.  
Make checks payable to: **VIKINGS VOLLEYBALL**

*Mail Entry Fee and registration to:*

North Branch Volleyball Tournament  
Michelle Kent  
5629 414<sup>th</sup> Street  
North Branch, MN 55056

651-283-7615