



# USA Volleyball-Lone Star Region Tournament Sanction Request/Report (1 of 2)



Request Date: \_\_\_\_\_ eMail: \_\_\_\_\_

Requested By: \_\_\_\_\_ Phone(Wk): ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Phone(Hm): ( ) \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone(Cell): ( ) \_\_\_\_\_

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Name of Tournament: \_\_\_\_\_ Date: \_\_\_\_\_

Site(s): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ # of Courts: \_\_\_\_\_

**Division(s)**

WOMEN  OP  A

MEN

CO-ED  BB  B

Juniors (Age Group)

## Financial Report

EXPENSE	INCOME
Sanction Fees: \$3 X # of Teams = \$ _____	_____ X \$ _____ = \$ _____ # of Teams      Entry Fee      Total Income
Facilities: \$ _____	
Awards: \$ _____	
Court Managers: \$ _____	
Total: \$ _____	Total Expense: \$ _____
	Total Profit or Loss: \$ _____

Report any team that failed to fulfill officiating duties. Sanctions will affect the team's participation in the next tournament. **Make Sure all teams in your tournament are aware of this.** (Out of Region also.)  
Mail results to the Regional Tournament Director within three days.

<b>Official Use ONLY</b>	Date Issued	Sanction #	Authorization
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# USA Volleyball-Lone Star Region Tournament Sanction Request/Report (2 of 2)



## Teams Entered in Tournament

WOMEN		Junior	WOMEN		Junior	WOMEN		Junior	WOMEN		Junior
MEN		(Age Group)	MEN		(Age Group)	MEN		(Age Group)	MEN		(Age Group)
CO-ED			CO-ED			CO-ED			CO-ED		
OP			OP			OP			OP		
A			A			A			A		
BB			BB			BB			BB		
B			B			B			B		
1.											
2.											
3.											
4.											
5.											
6.											
7.											
8.											
9.											
10.											
11.											
12.											
13.											
14.											
15.											
16.											
17.											
18.											
19.											
20.											

## Tournament Results

Location: \_\_\_\_\_

Date: \_\_\_\_\_

1.						
2.						
3.						
4.						
5.						