



# Mt Lofty League Volleyball Club Inc.



## Spikezone Mini Volleyball

(Version 2 with competition starting in week 2 NOT week 1 of term 2)

- Australia's first and best mini volleyball competition.
- 250 State, National and Olympic players started here.
- First class facilities and referees.
- Please note any primary students can nominate a team
  - Term 1 Beach Volleyball (7 week season - completed)
  - **Term 2 and Term 3 Indoor (14 week season)**
  - Term 4 Beach Volleyball (7week season – nominations close end of term 3)

# 2012 Spikezone Mini Volleyball

## OFFICIAL ENTRY FORM AND TAX INVOICE

SCHOOL NAME: \_\_\_\_\_  
TEAM CONTACT: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_  
PHONE: \_\_\_\_\_

Mt Lofty Volleyball Club: A.B.N # 32 250 206 954

**\*All entry fees are inclusive of GST\***

Please write the number of teams in the Division you wish to enter

DIVISION	ENTRY FEE	HOW MANY TEAMS
6/7 BOYS	\$320	
6/7 GIRLS	\$320	
4/5 BOYS	\$320	
4/5 GIRLS	\$320	

Each team fee includes the following services

- Team nomination fee of \$5.00.
- Volleyball SA \$10.00 Player Registration Fee for each player in the team.
- 14 weeks of weekly match fees at \$20.00 per week.
- 1 week of finals match fees at \$20.00 / team
- Gold and Silver medals for teams playing in the grand final.
- Special offers from our sponsors.

### Key Dates for 2012:

- Nominations close Friday 27<sup>th</sup> April (End of Week 1 Term 2)
- Draw to be distributed via email Wednesday 2<sup>nd</sup> May (Week 2)
- Competition starts Friday 4<sup>th</sup> May (Week 2, Term 2)

Cheques payable to Mt Lofty Volleyball Club – All fees must accompany entry form.  
Direct Deposit: Mt Lofty Volleyball Club BSB # 105-079 Account # 049025640

Credit Card: Name on card: \_\_\_\_\_ Number: \_\_\_\_\_ Date: \_\_\_/\_\_\_

Post Entry Forms to  
**Sheena Peters**  
**Heathfield High School Volleyball**  
**99 Longwood Rd Heathfield SA 5153**

Phone: Sheena Peters – 8139 9300  
Email: [sheena.peters@hhs.sa.edu.au](mailto:sheena.peters@hhs.sa.edu.au)



## 2012 Spikezone Mini Volleyball

	Team Name	Division requested
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

We intend to pay by

- Cheque
- Credit Card
- Cash
- Internet Transfer

Signed: \_\_\_\_\_  
(School Representative and Contact)

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

**OFFICE USE ONLY:**

Date Paid: \_\_\_\_ / \_\_\_\_ / \_\_\_\_      Paid by: Cheque, Cash, Internet Transfer, Credit Card,

Mt Lofty Volleyball Club Receipt Number: \_\_\_\_\_

Amount Paid: \$ \_\_\_\_\_

Signed: \_\_\_\_\_