

| Girls 7th Grade A | 9/14 - 9/16          |
|-------------------|----------------------|
| Girls 7th Grade B | 9/21 - 9/23          |
| Girls 8th Grade A | 9/28 - 9/30          |
| Boys 7th Grade    | 10/1 - 10/3          |
| Girls 6th Grade   | 10/5 - 10/7          |
| Boys 8th Grade    | 10/11, 10/13 & 10/15 |
| Boys 6th Grade    | 10/18, 10/20 & 10/21 |
| Girls 8th Grade B | 10/22 - 10/24        |
| Girls 5th Grade   | 10/26 - 10/28        |

| Location: | St. Matthias Gym – 9300 W. Beloit Rd. stmatthias-milw.org               |
|-----------|---|
| Fee:      | \$150.00 – Payable to St. Matthias Athletic Association                 |
| Format:   | Bracket play: Every team is guaranteed 3 matches. Weekday games start   |
|           | @ 5:30pm and weekend games start @ 5pm.                                 |
| Rules:    | Parkview Parochial League & WIAA rules apply. No club teams or all-star |
|           | teams are allowed. School with only one team need under .500 record to  |
|           | play in 'B' tournament, otherwise you have to play 'A' tournament.      |
| Awards:   | Individual trophies 1st, 2nd, 3rd & Consolation Champ.                  |
| Deadline: | Spot is held when payment is received.                                  |
| Concocion |   |





## 2012 St. Matthias Volleyball Tournament Registration Form

(Please print clearly)

| School:  | Grade/Division:       |               |  |
|--|-----------------------|---------------|--|
| Team Name:<br>Color (if more than one team):   | _                     |               |  |
| Head Coach:                                    |                       |               |  |
| Name:  |                       |               |  |
| Address:                                       |                       |               |  |
| Email:   |                       |               |  |
| Assistant Coach:                               |                       |               |  |
| Name:  | Phone:                |               |  |
|  | am Roster             |               |  |
| Players Full Name                              |                       | Jersey Number |  |
| 1  |                       |               |  |
| 2  |                       |               |  |
| 3  |                       |               |  |
| 4  |                       |               |  |
| 5  |                       |               |  |
| 6  |                       |               |  |
| 1  |                       |               |  |
| 8  |                       |               |  |
| 9  |                       |               |  |
| 10   |                       |               |  |
| 11   |                       |               |  |
| 12   |                       |               |  |
| Please list any known time conflicts:          |                       |               |  |
|  |                       |               |  |
| Please mail/email completed form and fee       | to:                   |               |  |
| Steve Biskupski                                |                       |               |  |
| 5597 Bluebird Court                            |                       |               |  |
| Greendale, WI 53129                            |                       |               |  |
| Call with any questions or to see if there are | openings: 414-491-881 | 1             |  |
| Email: s.biskupski@yahoo.com                   |                       |               |  |

Please do not mail registration until you know if there are openings, Thank you.