

# CHESAPEAKE REGION VOLLEYBALL ASSOCIATION

## Junior Tournament Sanction Request

1. Event Name: \_\_\_\_\_ Event Date: \_\_\_\_\_

2. Site of Event: \_\_\_\_\_

Street/City/St/Zip: \_\_\_\_\_

3. Name of Team/Club Host: \_\_\_\_\_ Contact: \_\_\_\_\_

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

Telephone: (day) \_\_\_\_\_ (eve) \_\_\_\_\_ (fax) \_\_\_\_\_ Email: \_\_\_\_\_

Name of Tournament Director: \_\_\_\_\_ Email: \_\_\_\_\_

4. Gender:  Girls  Boys  Level:  Mixed  Open  Club  Age Group (Circle): 18 17 16 15 14 13 12

5. Entry Fee: \_\_\_\_\_ Checks Payable To: \_\_\_\_\_

6. Number of Courts: \_\_\_\_\_ Teams per Court: \_\_\_\_\_ First Match Start Time: \_\_\_\_\_

7. Awards: \_\_\_ None \_\_\_ 1<sup>st</sup> Place Team \_\_\_ 2<sup>nd</sup> Place Team \_\_\_ 1<sup>st</sup> Place Indiv. \_\_\_ 2<sup>nd</sup> Place Indiv.

8. Locker Room Access (Circle): Yes No Showers: Yes No Food: On Site Nearby Distant

9. Number of Out-of-Region Slots (if any): \_\_\_\_\_

10. Remarks: \_\_\_\_\_

11. Pool play format (Check Appropriate Fields or Fill In as Required):

5-Team Pools: \_\_\_ (2) 25 Pt Games \_\_\_ Match Play 2/3 (2-25 Pt Games, 3<sup>rd</sup> Game 15 Pts) Other: \_\_\_\_\_

4-Team Pools: \_\_\_ (3) 25 Pt Games \_\_\_ (3) 21 Pt \_\_\_ Match Play 2/3 (2-25 Pt Games, 3<sup>rd</sup> Game 15 Pts) Other: \_\_\_\_\_

If there are only 6 or 7 entries, do you want to conduct the tournament? \_\_\_ Yes \_\_\_ No

12. Playoff format: (2 of 3) 25 Pt Games with 3<sup>rd</sup> Game 15 Pts **(This Format Required for All Semifinal and Final Matches)**

Other (To Be Used Only for Quarterfinal or Earlier Playoff Rounds): \_\_\_\_\_

### 13. TOURNAMENT EXPENSES

	Estimated	Actual
a. Facility charges	\$ _____	\$ _____
b. Sanction fee (\$7.00 per team)	\$ _____	\$ _____
c. Officials fees	\$ _____	\$ _____
d. New volleyballs	\$ _____	\$ _____
e. Awards	\$ _____	\$ _____
f. Score/lineup sheets, pens, etc	\$ _____	\$ _____
g. Other expenses	\$ _____	\$ _____
Total Expenses	\$ _____	\$ _____

### 14. TOURNAMENT INCOME

	Estimated	Actual
a. Entry fee \$ ___ x ___ teams =	\$ _____	\$ _____
b. Other Income	\$ _____	\$ _____
Total Income	\$ _____	\$ _____

15. Net profit or loss \$ \_\_\_\_\_ \$ \_\_\_\_\_

16. Signature \_\_\_\_\_ Date \_\_\_\_\_

### THIS SECTION FOR TOURNAMENT CHAIR ONLY

Event [is \_\_\_ / is not \_\_\_] approved for sanction.

Reason for disapproval or conditions applying to sanction: \_\_\_\_\_

Insurance number \_\_\_\_\_ Tournament Chair sig. \_\_\_\_\_ Date \_\_\_\_\_

## **Instructions for Completing the Junior Tournament Sanction Request Form**

1. Tournament hosts must follow policies and procedures as specified in the current Chesapeake Region Handbook when requesting and hosting sanctioned tournaments.
2. All numbered sections on the form must be completed. If any item does not apply, indicate by using "N/A" instead of leaving it blank.
3. Submit this Junior Tournament Sanction Request (CHRVA Form 2J) to the Junior Tournament Chair at least 6 weeks prior to the date of your tournament. CHRVA Form 3 (Adult Tournament Invitation) is not required from junior tournament hosts since invitations are posted electronically. The Junior Tournament Chair will return the original request form to you, either approved (with or without conditions) or disapproved (with an explanation for the disapproval). After the tournament, you will need to fill in the Actual Column and return the completed Form 2J to the Junior Tournament Chair.
4. The Junior Tournament Chair will send a copy of your approved Sanction form to the appropriate Age Division Coordinator and the Referee Assignor as official notification to begin coordinating and scheduling your tournament.

### 5. Specific Instructions by Line

<b>Line</b>	<b>How to fill it out</b>
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- |     |   |
|-----|---|
| 1.  | Self explanatory.   |
| 2.  | Give complete address of tournament site. If directions are not on the CHRVA web site, include complete directions to the site for teams and referees. It is optional but recommended that hosts send directions for new sites to the CHRVA directions web site POC for posting electronically. |
| 3.  | Self explanatory.   |
| 4.  | Check the appropriate box for gender, competition level and age.  |
| 5.  | Self explanatory.   |
| 6.  | Self explanatory, first match start time is the time the first matches start.   |
| 7.  | Check appropriate box(es) indicating whether or not awards are to be presented.   |
| 8.  | Circle appropriate answer(s).   |
| 9.  | State number of slots reserved for out of Region teams as applicable.   |
| 10. | Self explanatory, state special conditions or notices as applicable.  |
| 11. | Self explanatory, note that special advance permission is required for non-standard formats.  |
| 12. | Self explanatory, note that special advance permission is required for non-standard formats.  |
| 13. | When requesting the sanction, fill out only the Estimated column. After the tournament, complete the Actual column. Under "Official Fees" in the Actual column, include the cost you paid for teams without referees and/or scorekeepers.   |
| 14. | Same as for Section 13. In the "Other Income" Actual column, fill in the fees collected from teams without referees and/or scorekeepers.  |
| 15. | Self explanatory.   |
| 16. | Self explanatory.   |