

Player Costs: Name _____

Make checks payable to **Sequoyah Volleyball Booster Club**

	Cost	Quantity	Total	Size
Spandex – Black (optional if already purchased)	22			
Kneepads (optional if already purchased)	22			
Shoes (optional)	90			
Game day team T shirt (Mandatory purchase of 1)	11			
Coaches' fees, tournament fees, and program insurance	160	1	160	
		Total		

Parent Name: _____

Parent Email: _____

Parent Emergency number: _____

Date: _____
Check #: _____
Amount: _____