

2012 Eastern Shore Shamrock Classic



TEAM REGISTRATION FORM

Club/Team Name: _____

Division (please circle all that apply):

U15/16 Girls

U17/18 Girls

TEAM CONTACT INFORMATION

Coach/Team Contact Name: _____

Address: _____

Day Phone: _____

Cell Phone: _____

Email Address: _____

PAYMENT INFO:

Register and pay online at www.salisburychampionships.org OR mail checks & forms to:

Wicomico County Recreation, Parks, & Tourism

8480 Ocean Hwy

Delmar, MD 21875 (Make checks payable to Wicomico County)

Forms can also be FAXED to 410-341-4996

Registration Checklist

1. Submit Completed Team Registration Form
2. Submit Team Registration Fees (pay online or mail checks payable to Wicomico County)
3. Submit team roster with player and parent signatures (mail or FAX)

Note: Teams that withdraw less than 18 days prior to event date will forfeit entry fees.

For other tournament information, contact Terri Scott at 410-430-1318

mtascott@comcast.net or Pam Gregory 410-430-9690 pamela.gregory@yahoo.com



Host Club: Delmarva Juniors Volleyball Club