EAST KOOTENAY VOLLEYBALL CLUB – Deposit Form

DEPOSIT

DEPOSIT DATE:		Depositor Name:	
DEPOSIT AMOUNT: *Total of all items listed below.*		Home Phone ( )	Cell Phone ( )
TEAM: *Circle all that apply.*	U14M U15M U16M U17M U18M U14F U15F U16F U17F U18F	Email:	
Deposit is for the following Tournament(s):		☐ I have attached the associated cheque requests. ☐ Associated cheque requests will follow.	

Deposit Details

Deposit Items		
Player Name	AMOUNT	Cheque *or* Money Order Number or CASH
	$	
Total Deposit	**$**	

NOTES: