

**CHESAPEAKE REGION VOLLEYBALL ASSOCIATION**  
*Fellowship Sanction Request*

1. Event name: \_\_\_\_\_ Event date: \_\_\_\_\_

2. Site of event: \_\_\_\_\_

Street: \_\_\_\_\_

City/town: \_\_\_\_\_ Zip \_\_\_\_\_

3. Name of Team/Club host: \_\_\_\_\_

4. Contact person for event: \_\_\_\_\_

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

Telephone: (day) \_\_\_\_\_ (evening) \_\_\_\_\_ (fax) \_\_\_\_\_

Email: \_\_\_\_\_

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

5. Division: **Men**  Level: Open  AA  A  BB  B

**Women**  Level: Open  AA  A  BB  B

6. Number of courts: \_\_\_\_\_ Teams per court: \_\_\_\_\_ First match start time: \_\_\_\_\_

7. Fellowship Competition format (rally scoring):

4 & 5 Team Pools: Two (2) 25-pt games, with the 2<sup>nd</sup> game a DECIDING GAME (with court switch @ 13 points)

**8. ESTIMATED TOURNAMENT EXPENSES**

a. Facility charges \$ \_\_\_\_\_

b. Sanction fee (\$25.00 per Court) \$ \_\_\_\_\_

c. Other expenses \$ \_\_\_\_\_

Total Expenses \$ \_\_\_\_\_

**9. ESTIMATED TOURNAMENT INCOME**

a. Entry fee \$ \_\_\_ x \_\_\_ teams = \$ \_\_\_\_\_

b. Other Income \$ \_\_\_\_\_

Total Income \$ \_\_\_\_\_

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

11. 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 Fellowship Sanction Request Form**

1. Tournament hosts must follow policies and procedures as specified in the current Chesapeake Region Handbook when requesting and hosting Fellowship 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 Fellowship Sanction Request form (CHRVA Form 1) to the Tournament Chair **not later than three (3) weeks** prior to the date of your tournament. The Tournament Chair will return the original request form to you, either approved (with or without conditions) or disapproved (with an explanation for the disapproval).
4. The Region Sanction Fee of \$25.00 per court must be submitted with this form, checks payable to AAVO. Any reimbursement of the submitted sanction fee will be made by AAVO, upon your request after the conclusion of your tournament (e.g., sanction fee paid for 2 courts, but only 1 court used, etc.).
5. Any changes to your approved sanction, except those that must be made on the day of the event (e.g., failure of a team to show, etc.), must be approved by the Tournament Chair.
6. Division Coordinators have no responsibilities with regard to Fellowship tournaments. You are responsible for sending out team invitations, accepting and rejecting team applications, determining pool positions, and sending out playing schedules to accepted teams. Upon request, Division Coordinators will assist you by providing a list of last season's registered team contacts.
7. If you want your Fellowship tournament to be a "Rating Fellowship" (referees and scorekeepers rated for certification), you must make a request to both the Referee Chair and the Scorekeeper Chair at **least 4 weeks prior** to the date of your Fellowship. If approved, referee and/or scorekeeper raters will be provided on the day of your tournament.
8. During the tournament, the signed (**approved**) copy of this form must be available at the tournament site.
9. No final reports to the Chesapeake Region are required from you at the conclusion of your Fellowship Tournament.
10. Failure to comply with any or all of the above requirements may result in the sanction for your event being withdrawn and/or other Region penalties being assessed against you, as host, or against your team/club in accordance with the provisions of the Chesapeake Region Handbook