

# CHESAPEAKE REGION VOLLEYBALL ASSOCIATION

## Tournament 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  Women      Level: Open  AA  A  BB  B

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

7. Pool play format (all rally):

Half-Day Tournament (Check Box)

5 Team Pools:  (2) 25 pt Games, or Match Play (2 of 3 Games\*)  25 pt  21 pt, or Other \_\_\_\_\_

4 Team Pools: (3) Games  25 pt  21 pt, or Match Play (2 of 3 Games\*)  25 pt  21 pt, or Other \_\_\_\_\_

If there are only 6 or 7 entries, do you want to conduct the tournament? (check one box)  No  Yes

If Yes,  1 or  2 Pools of \_\_\_\_\_ Games (25pts) or Match Play (2 of 3 Games\*)  25 pt  21 pt, Other \_\_\_\_\_

\*The 3<sup>rd</sup> game of match play shall be 15 points.

8. Playoff format: Match Play (2 of 3) 25 pt games with 3<sup>rd</sup> game 15 pt (this format required for all semifinal and final matches)  
Other (to be used only for quarterfinal or earlier playoff rounds): \_\_\_\_\_

### 9. 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	\$ _____	\$ _____
<b>Total Expenses</b>	<b>\$ _____</b>	<b>\$ _____</b>

### 10. TOURNAMENT INCOME

	Estimated	Actual
a. Entry fee \$ _____ x _____ teams =	\$ _____	\$ _____
<b>Total Income</b>	<b>\$ _____</b>	<b>\$ _____</b>

11. Net profit or loss (Income-Expenses)      \$ \_\_\_\_\_      \$ \_\_\_\_\_

12. 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 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 Tournament Sanction Request form and the Tournament Invitation and Contract form (CHRVA Form 3) to the Tournament Chair at least 6 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). After the tournament, you will need to fill in the Actual Column and return this form to the Tournament Chair.
4. The Tournament Chair will send a copy of your approved Sanction form and your Tournament Invitation form to the appropriate Division Coordinator and the Referee Assignor as official notification to begin coordinating and scheduling your tournament.

### **5. Instructions**

<b>Section</b>	<b>How to fill it out</b>
1.	Self explanatory
2.	Give complete address of tournament site and include separately complete directions to the site for teams and referees.
3.	Self explanatory
4.	Self explanatory
5.	Circle the division(s) and mark the number of teams in the space next to each circled division.
6.	Self explanatory, first match start time is the time the first matches start.
7.	Self explanatory, note when special advance permission is required.
8.	Self explanatory, note when special advance permission is required.
9.	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.
10.	Same as for Section 9. In the "Other Income" Actual column, fill in the fees collected from teams without referees and/or scorekeepers.
11.	Self explanatory
12.	Self explanatory