

This is to certify that all student-athletes listed above are duly registered in this Association of OFSAA and are **eligible (teams that have ineligible players will be referred to the Competitions Committee and will be disciplined)** to participate in this year's **OFSAA Boys' AA Volleyball Championship** under the Rules and Regulations of this Association and those of OFSAA, including the OFSAA Transfer Policy. **Note:** "A **teacher** from the same school, or a retired teacher, as approved by the principal of the school, must accompany and be responsible for the behaviour of his/her team members for the duration of the Championship. If the teacher is not of the same sex as the student-athletes, and where the students are required or might be required to stay overnight, a supervisory adult, as approved by the Principal of the school, of the **same sex** as the students, must be present and available at the accommodation site for the duration of their stay in the accommodation".

Name of Teacher

Name of Supervisory Adult (may be the same)

Before acceptance, this form must be signed by the following people. We certify that all students herein listed are eligible according to **all** of OFSAA's By-Laws and Standing Rules. All schools entering this OFSAA Championship shall, by signature of its school principal on this Entry Form, acknowledge responsibility for making restitution for damage resulting from misconduct by his/per participants.

Any student-athlete participating in an OFSAA Championship or an OFSAA qualifying event must have participated as a member of a bona fide high school program during the current season under the supervision of a teacher-coach as certified by the school principal. In addition, I consent to the collection, use and disclosure of my personal information for the organization of the 2006-07 **OFSAA Boys' AA Volleyball Championship**.

Name: _____
(1) Principal (2) Coach (3) Association Convenor or Representative

Signature: _____
(1) Principal (2) Coach (3) Association Convenor or Representative

Please visit our website www.ofsaa.on.ca to view our privacy policy

Entry and entry fee of \$350, made payable to "Dryden OFSAA Volleyball!" must be **received** by (mail, fax, courier) no later than **Saturday November 18, 2006**. Associations holding playoffs on the weekend must contact the convenor prior to the entry deadline to make arrangements for their entry. **Entries received later than the entry deadline will be sent to OFSAA Board of Reference - Sanctions and may be refused!**

Submit entries to: Name: OFSAA Volleyball c/o Bob Beatty
School: Dryden High School
Address: 79 Casimir Ave
City/Town: Dryden
Postal Code: P8N 2H4
School Telephone: 807-223-1229
Fax Number: 807-223-2380

LATE ENTRIES WILL ONLY BE ACCEPTED IF THEY CAN BE ACCOMMODATED AND ARE SUBJECT TO A PENALTY.

BANQUET: All coaches and players must attend.

Number attending _____ @ \$25 = \$ _____

Please make a separate cheque payable to "Dryden OFSAA Volleyball".

OFSAA PARTICIPANT ADMINISTRATION FEE:

Number of participants _____ @ \$2.00 = \$ _____

Please make a separate cheque payable to "OFSAA".

LOCAL MEDIA CONTACT: (for press releases, results, etc.)

Person's name and/or department: _____

Nature and name of medium (newspaper, radio, TV): _____

Telephone #: _____ Fax #: _____

E-mail address: _____