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## Official AIHEC Volleyball Roster Registration Form

This form shall be submitted by: March 13, 2020

Submit the form to: Bert Curley (bertha.curley@bie.edu)

Tribal College: \_\_\_\_\_

Team Name: \_\_\_\_\_

Head Coach (optional): \_\_\_\_\_

Point of Contact Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### Roster

*Please type or print legibly.*

	First and Last Name		First and Last Name
1		5	
2		6	
3		7	
4		8	

I certify that the Tribal College participants listed on the roster meet all eligibility guidelines of the American Indian Higher Education Consortium (AIHEC) and are eligible to participate in the AIHEC Student Conference.

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Signature – Volleyball Point of Contact

Date