



Mercantile Volleyball Association of Sri Lanka

Sri Lanka Volleyball Federation, No 33, Torrington Place, Colombo 7

Phone: (+94) 710 682 682, Fax: (94-11) 2 669 344

E-mail: mvasrilanka@gmail.com Web: mva.lk

APPLICATION FOR NEW MEMBERSHIP / MEMBERSHIP RENEWAL - 2019

DETAILS OF APPLICANT/S (PLEASE FILL IN BLOCK CAPITALS)

Name of Club/Organisation :- _____

Address :- _____

E Mail Address :- _____

Telephone Number :- _____

Name of the Team Captain :- _____

Contact Number of the Captain :- _____

We enclose herewith an amount of Rs for

- | | |
|--|--------------------------|
| | (✓) |
| 1. New membership fee – Rs 10,000/- | <input type="checkbox"/> |
| 2. Membership renewal fee – Rs 5,000/- | <input type="checkbox"/> |
| 3. Tournament fee – Rs 5,000/- | <input type="checkbox"/> |

Note - Cheques to be drawn in favour of MERCANTILE VOLLEYBALL ASSOCIATION or should be paid to the undermentioned account and the bank receipt should be sent to either the email address (scanned copy) or to the postal address given above).

Signature :.....

Signature :.....

Name :.....

Name :.....

DIRECTOR/CEO/GM

TEAM CAPTAIN

DATE

FOR OFFICIAL USE ONLY

Application Received : Number :

Presented to the Committee : Decision : ACCEPTED / REJECTED

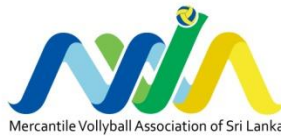
Membership Fee : Rs. Received in CASH/CHEUQE

.....
President

.....
Secretary

.....
Treasurer

Date :



MERCANTILE VOLLEYBALL TOURNAMENT 2019
APPLICATION FORM

Name of Enterprise/Sports Club :

Employer EPF No :

Men/Women :

	NAME OF PLAYER	EPF No	NIC No	SIGNATURE
01	Captain			
02	Vice-Captain			
03				
04				
05				
06				
07				
08				
09				
10				
11				
12				
13				
14				
	Head Coach			

Remarks: Details of the players who represented your team in last year and left after 2018 tournament.

	Name	Date of Join	Date Left	Comments
01				
02				
03				
04				

We enclose herewith a cheque/deposit slip for Rs 5,000/= as tournament fees.

I hereby certify that above mentioned players are permanent employees of our organization and they have joined our organization on or before **31st May 2019**.

.....
Signature of CEO/Director/General Manager/HR Manager

.....
Signature of the Captain



CHAMPIONSHIP	
DIVISION "A"	

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01	Captain			
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03				
04				
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06				
07				
08				
09				
10				
11				
12				
	Head Coach			

Please mention the Volleyball tournaments won (1st, 2nd or 3rd places) by your team during last two years.

- (1)
- (2)
- (3)

To be completed by the teams applying for Division "A".

Names of the players who have represented Sri Lanka Senior/Junior/Youth

	NAME	CATEGORY	YEAR
01			
02			
03			

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