

2025 TLU-PIICH GAMES



Roster 3 on 3 Volleyball

Division: (*Circle one*)

Team Name:

10 &Under 13&Under 17&Under

Coach / Manager:				
Signature: Coach / Manager	Phone			
Name First and Last, Print Clearly	Birthdate	Signature	First Nation	
Female				
1.				
2.				
Male				
1.				
2.				
3.				

Rosters due no later than 12:00pm Thursday, August 7th: fax 250-723-0463 or email: deanna.samuel@nuuchahnulth.org (in advance preferred)
Or you can submit them in person after the Opening Ceremonies.



Team Name:

2025 TLU-PIICH GAMES



Roster 3 on 3 Volleyball

Division: (*Circle one*)

Sr. Men's Sr. Women's

Coach / Manager:			
Signature: Coach / Manager	Phone		
Name First and Last, Print Clearly	Birthdate	Signature	First Nation
1.			
2.			
3.			
4.			
5.			

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