

New Member Form

Please provide NAGVA with the information requested below. This information will not be made public, sold, or in any way misused; it is the same data normally collected online (upon joining as a new member), or provided on the team waiver form. Please write as neatly as possible to ensure we capture the correct information.

Reaso	on for completing this form:			
New Member – player added to roster on-site during tournament registration.				
	New Member – dat	a not provided/incomplete	at the time of online payment.	
Member exists in database – this form is to resolve missing data.				
	NAGVA ID:			
1.	1. Full Name: (as you wish it to appear in the database)			
	First Name	Middle Initial or Maternal Name	Last (Family) Name	
2.	Email Address:			
3.	Date of Birth (MM-DD-YYYY):			
4.	Home Address:			
	City:	State:	Zip:	
5.	Phone #: ()			
6	T-Shirt Size (circle one):	YS S M I	YI YYI YYYI	