

*Casa Esperanza*  
*Patient Navigation and Survivor Services Program*

**Charity Recreational Volleyball Tournament**

Saturday, July 31, 2010

**REGISTRATION FORM**

**Team Information**

**Team Name:** \_\_\_\_\_ Check one: Recreational 6s  **or**  
Competitive 4s

**Team Captain:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**Corporate Sponsor:** \_\_\_\_\_  
**Contact Person:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**Payment Information**

**Team Registration**  
Number of players: \_\_\_\_\_ (4-12 players)  
Total amount: \_\_\_\_\_ (\$20/person)

**Additional Charitable Donation:** \_\_\_\_\_

**Non-participant Donation/Sponsor:** \_\_\_\_\_

**Total Amount Paid:** \_\_\_\_\_

Credit Card Number:

Expiration Date:

V Code:

*We accept credit cards, cash, checks, or money orders. Registration forms and payments can be mailed or hand-delivered to Casa Esperanza at 1005 Yale NE, Alb., NM 87106, and registration forms can be faxed to (505) 277-9876, or emailed to [ssoto@casaesperanzanm.org](mailto:ssoto@casaesperanzanm.org). Credit card payments can be processed in person or via phone. Thank you for your support!! ☺*

Your donations are tax deductible and individual receipts will be provided upon request. All proceeds from the event will directly benefit cancer patients and families at Casa Esperanza, a non-profit hospitality house in Albuquerque. To learn more about Casa Esperanza and the Patient Navigation Program or the event, please visit our website at: [www.casaesperanzanm.org](http://www.casaesperanzanm.org)

Questions? Contact Stacie Soto at (505) 277-9882  
or by email at [ssoto@casaesperanzanm.org](mailto:ssoto@casaesperanzanm.org)

