



NCVA CLASSIFIED ADVERTISEMENT REQUEST FORM

(Advertisement will be posted on the NCVA website only)
Allow 2 weeks from receipt of payment for processing.

CONTACT INFORMATION:

Club/School/Organization: _____

Name: _____

Address: _____

City, State, Zip Code: _____

Phone #: _____ Email: _____

COST:

1. Promotion of any NCVA sanctioned event, special tournaments, clinics, camps, looking for coaches or players
 - \$50.00 – text only, maximum 30 characters, including spaces and punctuation. All text will be reviewed and approved by the NCVA before posting.
 - \$100.00– text only, maximum 50 characters, including spaces and punctuation. All text will be reviewed and approved by the NCVA before posting.
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PAYMENT INFORMATION:

- Credit Card
- Check Enclosed

Please charge my: VISA MasterCard American Express

Make checks payable to:
NCVA
72 Dorman Avenue
San Francisco, CA 94124
Phone: (415) 550-7582
Fax: (415) 550-7762
E-mail: vball@ncva.com

Card Number: _____ Exp.: _____ Sec. Code: _____

Card member: _____

Signature: _____

Card member's Address: _____

Card member's City, State, & Zip Code: _____