2025 LMC VNEA VEGAS TOURNAMENT ENTRY FORM					
NAME ON PHOTO ID		DOB	CELL NUMBER	EMAIL ADDRESS	CAP
PLAYER 1	Main tea	m player who	has 12 nights play	ed with player 2 Must Play	
PLAYER 2	Main tea	m player who	has 12 nights play	ed with player 1 Must Play	
PLAYER 3	Any play	er from our VN	IEA leagues, must	have 12 league nights played	
PLAYER 4	Any play	er from our VN	IEA leagues, must	have 12 league nights played	
PLAYER 5	Any play	er from our VN	IEA leagues, must	have 8 league nights played	
PLAYER 6	Sub play	er if needed, m	iust have a minimi	um of 8 league nights played	
PLAYER 7	Sub play	er if needed, m	iust have a minimi	um of 8 league nights played	
TEAM NAME:			MISC INFO:		
Mark which player is the captain using the cap box					
Put completed form along with entry money in envelope. \$100 per team					
On outside of envelope, include Team name, Captains name, and \$ amount enclosed.					
Envelopes can be dropped off at our office or deposited in envelope collection boxes					
Office (2099 42nd St. NW, Winter Haven, FL 33881)					
Envelope collection boxes located at the following locations.					
Brew Hounds, One More Round, LA's Midway, Apple Lounge, and Desperado's Saloon					