



TRYOUT REGISTRATION FORM
Tryout Cost: \$20 per player for administrative expense

Athlete's Name _____ **DOB** _____

Guardian's Names _____

Guardian's Contact Number _____

Guardian's Email _____

PREVIOUS CLUB EXPERIENCE

Club Name _____ **Year** _____

Club Name _____ **Year** _____

Club Name _____ **Year** _____

SCHOOL TEAM

7th - Varsity JV

8th- Varsity JV

9th - Varsity JV

10th- Varsity JV

11th- Varsity JV

12th- Varsity JV

POSITION PREFERRED

Setter _____

Hitter _____

Libero _____

DS _____

Please list any other school or club sports you plan on participating in during the 2023-2024 season:

All players must present this form, along with your USA Volleyball Junior Tryout Membership card, Lystedt Concussion Waiver Form, USAV Medical Release, USAV Volleyball Waiver and Release of Liability, and \$20 registration fee before participating in tryouts.