

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

Aunete s Name		DOB	
Guardian's Names			
Guardian's Contact Number	•		
Guardian's Email			
	PREVIOUS CLUB EXPI	PREVIOUS CLUB EXPERIENCE	
Club Name	Year		
Club Name	Year		
Club Name	Year		
SCHOOL TEAM		POSITION PREFERRED	
7th - □ Varsity □ JV		Setter	
8th- □ Varsity □ JV		Hitter	
9th - □ Varsity □ JV		Libero	
10th- □ Varsity □ JV		DS	
11th- □ Varsity □ JV			
12th- □ Varsity □ JV			

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.