



## Try out Information Sheet

(Please fill out this form completely. Write legibly with ink. This form must be turned for your files.)

Actual Age Division: \_\_\_\_\_ Playing Age Division: \_\_\_\_\_ Team: \_\_\_\_\_

Athlete's Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Social Security # \_\_\_\_\_

### **Mother's Information**

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ OK to contact @ work Y N

Email Address: \_\_\_\_\_ Include information on Team Roster? Y N

### **Father's Information**

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ OK to contact @ work Y N

Email Address: \_\_\_\_\_ Include information on Team Roster? Y N

With whom does the athlete reside: Mother Father Both

The party that is responsible for payment: Mother Father Both

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

Years Played Club: \_\_\_\_\_ Club Name: \_\_\_\_\_

Positions Played: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Right or Left Handed?

Clothing Sizes: T-Shirt \_\_\_\_\_ Spandex \_\_\_\_\_ Pants \_\_\_\_\_ Jacket \_\_\_\_\_

**By filling out the above questions, please be aware that you are authorizing Power Volleyball to use information, as PVA deems appropriate, in various publications.**