

YVVC PLAYER INFORMATION

PLEASE PRINT LEGIBLY

PLAYER NAME	
PARENTS/GUARDIANS	
ADDRESS	
ADDRESS CON'T	
PHONE NUMBER	HOME-
	CELL-
EMAIL	1-
PRACTICE SHIRT SIZE	
SCHOOL	
AGE & DATE OF BIRTH	
CURRENT GRADE	
Yes____No____	Are you involved in any school activities? Which ones?
Yes____No____	Do you plan on trying out for more than one volleyball club?
Preferred Jersey #	

YVVC USE ONLY

Registration Provided _____ Birth Certificate _____

TEAM	
COACH	
PAID AT TRYOUTS	_____ Cash _____ Check Check No. _____ Initial _____