

**FOR CLUB USE ONLY**

<b>Tryout #:</b> _____	<b>Age:</b> _____	<b>Tryout age division:</b> _____
<b>Check or Cash</b>	<b>Check #:</b> _____	

**Delta Force Volleyball Tryout Registration Form  
2011 - 2012 Season**

Player Name \_\_\_\_\_ Age on Sept 1, 2012 \_\_\_\_\_

DOB \_\_\_/\_\_\_/\_\_\_ School \_\_\_\_\_ Grade \_\_\_ Grad. Yr. \_\_\_\_\_

Have you played club before? \_\_\_\_\_ Which Club? \_\_\_\_\_

Circle the position(s) that you wish to be considered for (14's - 18's only). Setter, Middle Hitter, Outside Hitter, DS/Libero. (10's-13's do not have to designate a position).

Do you play on a school team? \_\_\_\_\_ Level? Vars. / IV / Fr. / 8<sup>th</sup> / 7<sup>th</sup> / 6<sup>th</sup> / 5<sup>th</sup>

Player phone \_\_\_\_\_

Player address \_\_\_\_\_

Mother's name \_\_\_\_\_ Mother's email \_\_\_\_\_

Father's name \_\_\_\_\_ Father's email \_\_\_\_\_

Mother's phone \_\_\_\_\_ Father's phone \_\_\_\_\_

Parents' Address if different \_\_\_\_\_

Circle which program you are trying out for: Full Club Season (November - April) / Short Season

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USAV Registration	USAV Medical Release Form	Delta Force Registration Form	Payment
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