



Division

# THE SPORTS SHACK

## TRYOUT REGISTRATION FORM



Tryout #

### PLAYER INFORMATION

NAME \_\_\_\_\_ EMAIL \_\_\_\_\_ CELL: \_\_\_\_\_

BIRTH DATE \_\_\_\_\_ AGE \_\_\_\_\_ SCHOOL \_\_\_\_\_ GRADE \_\_\_\_\_ HS GRAD DATE \_\_\_\_\_

### PARENT INFORMATION

NAME \_\_\_\_\_ EMAIL \_\_\_\_\_ CELL \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

DO YOU PLAY VOLLEYBALL AT SCHOOL?

IF SO, WHICH TEAM?    VARSITY    JR. VARSITY    GRADE LEVEL \_\_\_\_\_ COACH \_\_\_\_\_

HAVE YOU EVER PLAYED CLUB VOLLEYBALL BEFORE? \_\_\_\_\_

IF YES, WHICH CLUB? \_\_\_\_\_

WILL YOU ATTEND AN END OF THE YEAR TRAVEL TOURNAMENT IN JUNE?    YES    NO

HEIGHT \_\_\_\_\_ APPROX. WEIGHT \_\_\_\_\_

HANDED, **CIRCLE ONE**    RIGHT    LEFT

POSITION PLAYED:    SETTER    MIDDLE BLOCKER    OPPOSITE

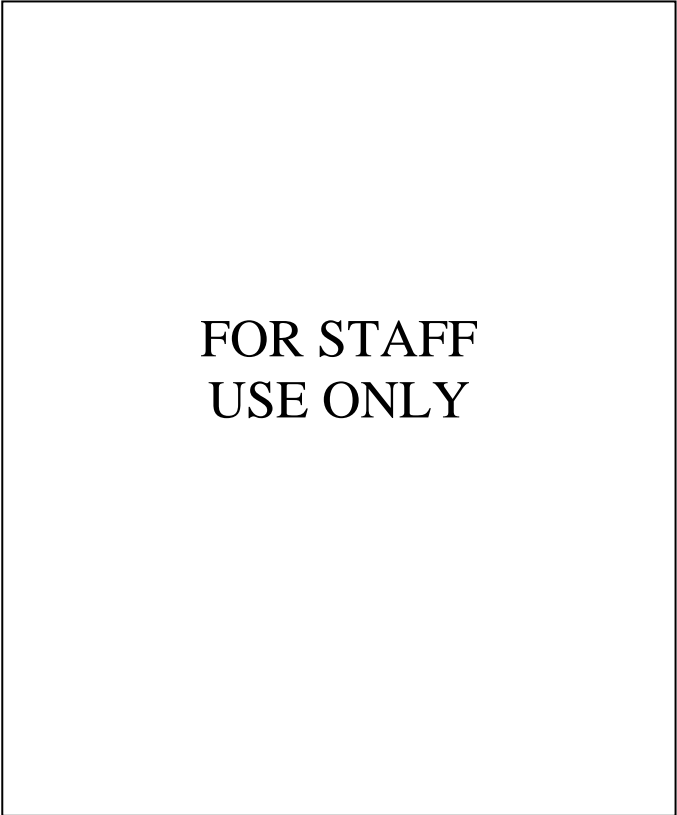
SWING HITTER    OUTSIDE HITTER    DEFENSIVE SPECIALIST

IF OFFERED A POSITION ON A SPORTS SHACK TEAM, **CIRCLE ONE**:

ABSOLUTELY, I WILL ACCEPT

MAYBE, DEPENDING ON WHICH TEAM I MAKE

ONLY IF I MAKE A TOP TEAM



**FOR STAFF  
USE ONLY**

### **FOR STAFF USE ONLY**

PASSING    1    2    3    4    5 \_\_\_\_\_

SETTING    1    2    3    4    5 \_\_\_\_\_

HITTING    1    2    3    4    5 \_\_\_\_\_

TEAM PLAY    1    2    3    4    5 \_\_\_\_\_