



2010 Tryout Information Form

PLEASE PRINT CLEARLY IN INK!

Player Information

Player's Name _____ Age _____ Birthdate _____

Mailing Address: _____

Player's Home Phone: _____ Player's Cell Phone _____ Player's Email _____

School Attended _____ Coach _____

Height _____ Weight _____ Right/Left Handed _____

How many years have you played volleyball? _____

How many years have you played club? _____

What level did you play this year? 6th 7th 8th JV Varsity (Circle One)

What percentage of the time did you play in school this year? 20% 40% 60% 80% 100% (Circle One)

What other sports do you play? _____

Carolina Islanders is the only club that I'm trying out for: Yes No (Circle One)

Parent Information

Father's Name _____ Email Address _____

Home Phone _____ Work Phone _____ Cell Phone _____

Mother's Name _____ Email Address _____

Home Phone _____ Work Phone _____ Cell Phone _____

Carolina Islanders will complete the following:

Block _____ Reach _____ Approach Jump _____