



**High Flyers Volleyball Club 2010 Tryout Registration**  
**Athlete Information**

Athlete's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current School: \_\_\_\_\_

Previous Club Volleyball Experience: \_\_\_\_\_ yrs, Club Name: \_\_\_\_\_

**Parent(s) or Guardian (Primary Contact):**

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

Email: \_\_\_\_\_ Home Phone Number: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

**Age Division?**

*Essentially, how old will you be on August 31, 2010?*

*That is your age division!*

Position preference (circle all that apply):

**Setter**

**Middle Hitter**

**Outside Hitter**

**Libero**

**Tryout Number:**

(Club Use Only)

Tryout Fee: **\$10**

Make checks payable to: High Flyers Volleyball club

Club Use Only: Cash \_\_\_\_\_ Check No. \_\_\_\_\_