

La Vernia Volleyball Club – Try-out Registration Form

Name: _____ School: _____ Grade: _____

Address: _____ City/State/Zip: _____

Athlete's Cell: _____ Athlete's Email: _____

Parent's Name: _____ Cell: _____ Email: _____

Parent's Name: _____ Cell: _____ Email: _____

Athlete's Birth date: ___/___/___ Age: _____ Dominant Hand: right or left

Position: _____ (Middle, Outside Hitter, Right Side Hitter, Setter, DS/Libero)
(if known)

.....
Team/Season Interest: please check one

_____ Regional/Local Team – I want to play on a team that plays in the San Antonio/Austin area.

_____ National Team – If my skill level is good enough, I want to play on a National team that will travel to San Antonio, Austin, and possibly Houston, Dallas, or other areas of the state and possibly out of state. This team will be competing for a bid to USAV nationals which will be held out of state in late June/early July. I understand that additional fees will apply as the team decides which tournaments, including national qualifiers, the team will attend.

_____ I want to be on the highest level team that I make, regardless of location, cost or travel.
.....

Previous Volleyball Experience (Jr. High, HS, Club): _____

Other Activities (4H, Stock shows, School Sports, etc): _____

What do you want to accomplish this season in club volleyball? _____

Do you hope to play volleyball in college? Yes No Not Sure

If YES, do you know what your major will be? _____

Are you interested in having a skills DVD made for you? _____

Jersey # (list your top three choices): _____

.....
I, _____, give my daughter, _____, permission to play with the La Vernia Volleyball Club (LVVC). She and I promise to abide by the rules, policies, and guidelines set forth by LVVC and the United States Association of Volleyball (USAV). I understand that I am responsible for paying the try-out fee, which is the down-payment for my daughter's tuition, and is non-refundable. If my daughter is accepted to an LVVC team, I agree to pay her tuition according to the schedule set forth by the club. I understand that all tuition is non-refundable unless a team does not form or the athlete is seriously injured. By filling out the information on this form, I agree to and understand that some of the athlete's information may be listed on the La Vernia Volleyball Club website, along with pictures of the athlete.
.....

To be completed by LVVC Officers

Try-out Fee Paid: Ck # _____ Amount _____ USAV Form: _____ Med Rel Form: _____

Parents Code of Conduct: _____ Athlete's Code of Conduct: _____