



2012 Flatirons Volleyball Club Tryout Form

Please print:

Player name _____

Address _____

Home Phone (_____) _____ - _____ City _____ Zip _____
 School _____

I am trying out for the _____ and under age division (12, 13, 14, 15, 16, 17, 18).

How old will you be on Sept 01, 2012? _____ **(this is your proper age division)**

Position(s) trying out for: 1) _____ 2) _____

Player Cell Phone _____ E-mail _____

Gold Crown team _____ (print clearly)

Birth date ____/____/____ Grade _____

Mother's name _____ Cell # _____

Mother's E-mail: _____

Father's name _____ Cell # _____

Father's E-mail: _____

_____ I cannot play on a National team; I am trying out for a Regional team.

Flatirons Volleyball Club Office Use Only

Tryout Fee: Cash _____ or Ck# _____ \$45 _____ Rec'd by: _____ Date: ____/____/____
 Deposit (separate check): Check# _____ Amount: _____ Rec'd by: _____ Date: ____/____/____

- ___ A Flatirons Tryout Form
- ___ B Flatirons Participation Conflicts Form
- ___ C USA Volleyball membership/identification card or confirmation form
- ___ D RMR Player Medical History Form
- ___ E Proof of age for new players: 2 copies of a state issued identification ie. Birth cert., passport, drivers license

Note: _____ **TRYOUT NUMBER:** _____