

# Biltmore Volleyball Academy

## Tryout Information Sheet

Attach Photo Here	TRYOUT NUMBER: _____
	TEAM AGE TRYING OUT FOR: _____
	ACTUAL AGE DIVISION: _____
	TRYING OUT FOR: Elite, National, Regional
	If you do not make the Elite or National team are you willing to be on a Regional Team? Yes or No

Players Name: \_\_\_\_\_ Age: \_\_\_\_\_

Birth Date: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Yrs on school team: \_\_\_\_\_ Yrs on club team: \_\_\_\_\_

Position: Outside Hitter/ Right Side Hitter/ Middle Hitter/ Setter/ Defensive Specialist / Libero

Circle all that apply

Will you play a winter or spring sport? Yes/ No If so, what? \_\_\_\_\_

Will you play a winter or spring non-school sport? Yes/ No If so, what? \_\_\_\_\_

Parent(s) Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

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

Cell Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Please write legible as this is how we will contact you

### COACHES NOTES:

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