

WSY CLUB VOLLEYBALL

PLAYER PROFILE - 2024-2025

PLAYER NAME:								
STREET ADDRESS:								
CITY & ZIP CODE:								
PARENT EMAIL:								
ADDITIONAL EMAIL:								
PARENT PHONE NUMBER								
BIRTHDATE (mm/dd/yy):								
HEIGHT:								
GRADE (Circle One):	5	6	7	8	9	10	11	12
PARENT NAME(S):								
Age group your daughter is trying out for? See age definition chart	U12	U13	U14	U15	U16	U17	U18	

Junior High or High School Volleyball Experience (if any)

School District or HS:							
Levels (Circle):	Varsity	JV	Jr. High	No Experience			
Number of Years:							
Position(s):							

Club Volleyball Experience (if any)

Club Name:							
Club Coach(es):							
Number of Years:							
Position(s):							

T-Shirt Size for tryouts	YL	S	M	L	XL	XXL
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3 preferred jersey number(s): _____

Parent Name: _____	Parent Signature: _____
Relationship to Player: _____	