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| Club Volleyball 2018-2019 Tryout Registration Form |
| Name |  |
| Uniqname |  |
| Phone Number |  |
| Year |  |
| Hometown |  |
| Height |  |
| Primary Position |  |
| Secondary Position (optional) |  |
| Did you play on your high school’s varsity team? If so, for how long? |  |
| Are you committed to or do you plan to join other clubs/activities/jobs? |  |
| Do you have any classes, clubs, or work that will interfere with practices? (Tu/Th 7-9:30pm) |  |
| Is there anything else you would like us to know about you? |  |
| Do you have any questions or concerns about the club? |  |