

# TREMORS

## VOLLEYBALL

### TRYOUT REGISTRATION

#### 11's – 14's DIVISION

#### 2022-2023 SEASON

PLAYER INFORMATION			
NAME:			
AGE:	BIRTHDATE:		
ADDRESS:			
CITY:	ZIP:		
SCHOOL:	GRADE:		
DATE(S) ATTENDING:	<input type="checkbox"/> FRI 10/14	<input type="checkbox"/> SAT 10/15	<input type="checkbox"/> SUN 10/16
DIVISION(S) TRYING OUT FOR (CIRCLE ALL THAT APPLY):	11	12	13 14
PREVIOUS CLUB EXPERIENCE (if any):			
POSITION (check all that apply):			
<input type="checkbox"/> OUTSIDE HITTER <input type="checkbox"/> MIDDLE BLOCKER <input type="checkbox"/> RIGHT HITTER <input type="checkbox"/> SETTER <input type="checkbox"/> DEFENSIVE SPECIALIST / LIBERO <input type="checkbox"/> NO PREFERENCE			
HANDED:    RIGHT    LEFT	HEIGHT:		
CONTACT INFO IF OFFERED A POSITION:			
PHONE #:			
EMAIL:			

PARENT/GUARDIAN CONTACT INFORMATION
NAME:
PHONE #:
EMAIL:

**PLEASE SUBMIT THE FOLLOWING:**

1. SF TREMORS 2022-2023 TRYOUT REGISTRATION FORM
2. TRYOUT FEE: \$30 FOR 1 DAY, \$35 FOR 2 DAYS, \$40 FOR 3 DAYS CHECK PAYABLE TO: SF TREMORS VBC

FRIDAY, OCTOBER 14, 2022		
AGE DIVISION	REGISTRATION TIME	TRYOUT TIME
11's, 12's	5:00PM-5:30PM	5:30PM-7:30PM
13's, 14's	6:50PM-7:20PM	7:30PM-9:30PM
SATURDAY, OCTOBER 15, 2022		
AGE DIVISION	REGISTRATION TIME	TRYOUT TIME
13's, 14's	9:20AM-9:50AM	10:00AM-12:00PM
11's, 12's	11:35AM-12:05PM	12:10PM-2:10PM
12's, 13's, 14's	1:45PM-2:15PM	2:20PM-4:30PM
SUNDAY, OCTOBER 16, 2022		
AGE DIVISION	REGISTRATION TIME	TRYOUT TIME
13's, 14's	12:50PM-1:20PM	1:30PM-3:30PM
11's, 12's	2:50PM-3:20PM	3:30PM-5:30PM
13's, 14's	4:50PM-5:20PM	5:30PM-7:30PM

**TRYOUT LOCATION:** HOLY TRINITY GYM, 999 BROTHERHOOD WAY, SAN FRANCISCO, CA 94132

**NOTE:** Due to the uncertainty of the CYO School League Schedule, we are providing flexibility to choose your preferred tryout date(s) and time(s) that work best for you.

#### WAIVER

I hereby authorize the staff of SF Tremors Volleyball Club to act for me according to their best judgment in any emergency requiring medical attention. I hereby waive and release SF Tremors Volleyball Club, the coaches and volunteers, from any and all liability for any injuries, illnesses, or lost property incurred while at the 2022-2023 Tryouts. I have no knowledge of any physical impairment that would be affected by the named player's participation in SF Tremors Volleyball Club Tryouts. My signature on this waiver also states that the named player is covered by my personal medical insurance policy. This waiver of liability expressly includes transportation to and from, or in conjunction with the said program.

PLAYER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
 PARENT/GUARDIAN'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

FOR CLUB USE ONLY
BIB #:
CHECK #: