



# South Dakota Volleyball Club

## Player Registration Form

### PLAYER INFORMATION

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Player's Cell Phone \_\_\_\_\_ Player's Email: \_\_\_\_\_  
 Grade:  -4  -5  -6  -7  -8  
 -9  -10  -11  -12 Birth Date: \_\_\_\_\_  
 School Player Attends: \_\_\_\_\_  
 Players Preferred Position(s) \_\_\_\_\_  
 Preseason Interest? (Grades 10-12 only)  -Yes  -No  
 Player's Jersey Size \_\_\_\_\_  
 Player's Preferred Jersey # (give two choices) \_\_\_\_\_ & \_\_\_\_\_

### PARENT INFORMATION

Mother/Legal Guardian Name \_\_\_\_\_  
 Mother's Email Address \_\_\_\_\_ (our main source for contact, write neatly)  
 Contact Phone: Home ( ) - Cell ( ) -  
 Father/Legal Guardian Name \_\_\_\_\_  
 Father's Email Address \_\_\_\_\_ (our main source for contact, write neatly)  
 Contact Phone: Home ( ) - Cell ( ) -

### EMERGENCY CONTACT

In case of emergency, please contact:  
 Name \_\_\_\_\_ Phone ( ) - Relationship to player \_\_\_\_\_

### CONSENT FOR PLAYER TO PARTICIPATE IN TRYOUTS

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date

### SOCIAL MEDIA PHOTOGRAPHY RELEASE

South Dakota Volleyball Club has my permission to post photos of my daughter on the SDVC Website, Facebook page, and possibly Twitter.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date

**Staff Use:**

**Tryout Payment Received**

\_\_\_\_\_ Cash \_\_\_\_\_ Check (#\_\_\_\_\_)