

Spiketown Volleyball Club Player Profile

(Only needed if not pre-registered)

(Please print clearly and use all capitals)

Player's Name: _____

Player's Date of Birth: _____ Player's Cell Number: _____

Age as of **JULY 1, 2024**: _____ OVR Membership #: _____

Parent/Guardian Name: _____ Parents Phone: _____

Parents Email: _____

Note: tryout candidates will be contacted via email! Please write clearly!!! Add parent's email address!!!

Current School: _____ Grade: _____

Current position played in school (this position may differ in club): _____

Please note if you are playing spring school sport: _____

Previous Club: _____

Are you interested in 2023 Club Winter Season: Yes No