



Player Tryout information

Player Name				DOB:
Parents Names				
Address:				
Parent Cell #				Tryout #:
Player Cell #				
Primary Email				Age as of July 1 st of birth year:
NCVA #				
Payment Method	<input type="checkbox"/> Cash	Check #	<input type="checkbox"/> Venmo	<input type="checkbox"/> Zelle
Check the box(es) for the desired level of play below:				
<input type="checkbox"/>	12 Power	<input type="checkbox"/>	12 Premier	<input type="checkbox"/>
<input type="checkbox"/>	13 Premier			<input type="checkbox"/>
				13 Power
				14 Power

Tryout Information

Date: Saturday, October 26th, 2024

Location: Vinewood Community Church (1900 W. Vine St., Lodi, CA 95242)

Cost: \$40/player

Venmo Account: @Spark_Volleyball_61

Date	Age Group	Check in Time	Tryout Time
Saturday, October 26 th	13's & 14's	9:30 am	10 am to 12 pm
Saturday, October 26 th	12's	12:30 pm	1 to 3 p.m.

PLEASE READ: I certify that my daughter is healthy and in good physical condition and can participate in Spark Volleyball Club tryouts; I hereby waive and release Vinewood Community Church, Lodi Unified School District, Spark Volleyball Club, its instructors, coaches and volunteers from any liability for personal injury arising out of my child's participation in tryouts for Spark Volleyball Club.

Parent Signature: _____ Date _____

Parent Name (Please Print): _____