

TRYOUT INFORMATION & EVALUATION

PLAYER INFORMATION			
Home Phone		Cell Phone	
<i>Circle preferred contact number</i>			
DOB		Grade	
School			
School Coach (current)			
<i>If you have a position, list all positions your current play at your school. Leave blank if you do not have a position</i>			
Position	Setter	Passer (Libero, DS)	Hitter/Blocker
Do you wish to be considered for positions (all) other than your		YES	NO

CLUB EXPERIENCE				
<i>List any club you have played for in the past and your experience. Club, position, level of play, type of tournaments; ie: Region, Power Leagues, Invitation Only, National Qualifies</i>				
<i>Club</i>	<i>Power</i>	<i>Open</i>	<i>Developmental</i>	<i>Other</i>
<i>Ranked team in the club: 1 2 3 4</i>				

DESIRED PROGRAMS TO BE CONSIDERED FOR								
<i>Complete all programs you wish to be considered for. For more information on each program visit www.SportsAcademy-VB.com</i>								
Choice	Age	Regional	Carolina	Challenge (Club)	Challenge (Power)	National (Power)	National (Travel)	All
1								
2								
3								

SPORTS ACADEMY STAFF USE					
<i>Complete rubric and attach</i>					
<i>Serve</i>		<i>Pass</i>		<i>Set</i>	
<i>Attack</i>		<i>Block</i>		<i>Vertical</i>	
<i>Court Movement</i>		<i>Game Knowledge</i>		<i>Team Play</i>	
<i>Attention</i>		<i>Coachable</i>		<i>Sportsmanship</i>	