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**PLAYER INFORMATION FORM**

**PLAYER INFORMATION**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth date \_\_\_\_\_ /\_\_\_\_\_/\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code \_\_\_\_\_\_\_\_\_\_\_

Phone (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMERGENCY CONTACT:**  If Parent/Guardian named above is not available, please contact:

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home Phone (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Player \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_

**RECRUITING INFORMATION**

School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current Grade \_\_\_\_\_ Graduation Year \_\_\_\_\_\_\_\_\_

Position: □ Setter □ MB □ Outside Hitter (left) □ Outside Hitter (right) □ Defensive Specialist □ Libero

Height \_\_\_\_ft.\_\_\_\_in. Weight \_\_\_\_\_\_\_ Vertical \_\_\_\_\_\_\_\_\_\_ Reach \_\_\_\_\_\_\_\_\_\_ Block \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dominant Hand □ R □ L

Previous Club Volleyball Experience □ Y □ N Club Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**UNIFORM SIZING**

Shirt Size: □ XS □ S □ M □ L □ XL Jersey Size: □ XS □ S □ M □ L □ XL Short Size: □ XS □ S □ M □ L □ XL

Warm-up Jacket □ XS □ S □ M □ L □ XL Warm-up Pant: □ XS □ S □ M □ L □ XL

Preferred Number: \_\_\_\_\_\_\_\_\_

I understand, agree, and acknowledge that playing volleyball consists of strenuous physical activity, and have no knowledge of any physical impairment which would be affected by the above named player’s participation in practices and/or competition. I hereby and promise that I will not hold Washington Elite VBC, its Directors, coaches, staff, and assignees from responsible for any loss, damages, or personal injury received as a result of participation.

 I understand that the above information can and will be distributed to college coaches for the purposes of recruitment in the event that college programs request contact information from Washington Elite VBC, it’s administration, or coaching staff.

 I verify that the player named above has been checked by a licensed physician and is physically able to participate with Washington Elite VBC. The player has no medical, physical, mental, or emotional health conditions that would hinder or prevent his/her participation in Washington Elite VBC activities.

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