

**OFFICE USE ONLY**

TO# \_\_\_\_\_  
Payment: Y / N Ck# \_\_\_\_\_  
Age Verif: \_\_\_\_\_  
Rec: \_\_\_\_\_



# 2019-2020 Tryout Waiver & Registration Form

## Athlete Information

Player's Last Name: \_\_\_\_\_ Player's First Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Home Phone: (    ) \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Cell Phone: (    ) \_\_\_\_\_

Player Position(s): Outside \_\_\_\_\_ Middle \_\_\_\_\_ Setter \_\_\_\_\_ Opposite \_\_\_\_\_ Def. Spec \_\_\_\_\_

School Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Participation Date(s) (circle one):                      SATURDAY                      MAKEUP                      BOTH

Team Trying Out For (circle one):                      18      17      16      15      14      13      12

T-Shirt Size:    S    M    L    XL

Participation: (circle one):                                      Elite/Power League Player

## Parent Information

Parent's Last Name: \_\_\_\_\_ Parent's First Name: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

I have provided the above information understanding it will not be published outside of Core Volleyball Club without my express written consent. Also all the information provided above is accurate and true to the best of my knowledge.

In consideration for being permitted by Core Volleyball Club (CVC)/Core Performance LLC to participate in the above tryouts, I hereby waive, release and discharge any and all claims for damages for personal injury, death or property damage which I or my child (if participating) may have, of which hereafter accrue to me, or my child, against CVC as a result of my or my child's participation in the activity. This release is intended to discharge Core Volleyball Club and Core Performance, LLC, its officers, Board of Directors, volunteers, and any other involved public agencies from and against any and all liability arising out of or connected in any way with my or my child's participation in the activity.

I HAVE CAREFULLY READ AND UNDERSTAND THE ABOVE RELEASE AND INDEMNITY AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND AGREEMENT TO INDEMNIFY CORE VOLLEYBALL CLUB AND I SIGN IT OF MY OWN FREE WILL.

\_\_\_\_\_  
Parent/Guardian Name                      Parent/Guardian Signature                      Date:

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