

504 ELITE VOLLEYBALL – PLAYER REGISTRATION

***Please Print Carefully*

Player Name: _____ Date of Birth: _____

Street: _____ Home Phone: _____

City: _____ Zip: _____ Cell Phone: _____

School: _____ Height: _____

Previous Clubs: _____ Grade: _____

Mom/Guardian Name: _____ Work/Cell Phone: _____

Mom's Email (mandatory): _____

Dad/Guardian Name: _____ Work/Cell Phone: _____

Dad's Email (mandatory): _____

Player's Email (mandatory): _____

Player's Adult T-Shirt Size: _____