**DMS Volleyball Tryout Form**

Coach Michelle Kelley kelleym@leonschools.net

|  |  |
| --- | --- |
| **Student Athlete Information**  |  |
| Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Grade:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |  |
| DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position 1:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Position 2:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Important Medical Info: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
|  |
| Team Eligibility Requirements1. Maintain a 2.0 GPA 2. Behave appropriately in school and on the court * 1. 3. Have ALL forms filled out and turned in…
	2. a. Up to date yearly sports physical
	3. b. Activity Participation form
 |
|   |
|  |

 |
| Shirt Size: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |  |
| **T-shirt sizes in adult, unless otherwise indicated** FORMS THAT NEED TO BE ON FILE IN THE FRONT OFFICE TO TRYOUT1. Up to date physical2. Activity formFront Office Check OffYou will turn this sheet in to Coach Kelley at tryouts. You need BOTH initialed off below by Mrs. Ruthstrom to be eligible to tryout.Up to date Physical on file: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Physical on file (m/d/y): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Up to date LCS Activity form on file: \_\_\_\_\_\_\_\_\_\_\_Other Relevant Volleyball Info: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Parent/Guardian Information**Name(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Primary Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Secondary Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |