

UNION Volleyball Club LLC.

Player Information Sheet/ Parent Authorization & Contract

Player Information:

Player Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Player Phone: _____ Date of Birth: _____

What school does the currently attend: _____ Graduation year: _____

Does the Player currently participate on a school team: _____

What positions (List in order of preference) 1st _____ 2nd _____

(S-setter, M-Middle, L-left, R-right, DS-defensive specialist, A-any)

Team preference:

Travel: _____ Regional: _____ Developmental/short season _____

Site Preference:

SISC/Nolan(so. Ind.): _____ HOOPS(Lou.): _____ EITHER: _____

Travel Teams could practice out of both locations if team is split evenly Ind/Lou. Players may specify to play on a team at there selected site.

Parent/Guardian Information:

Mom's Name: _____

Address if different from Player: _____

City: _____ State: _____ ZIP: _____

Cell Phone: _____ Email: _____

Dad's Name: _____

Address if different from Player: _____

City: _____ State: _____ ZIP: _____

Cell Phone: _____ Email: _____

Emergency Contact Name: _____ Phone: _____

I would be interested in being a Team Rep: _____ (Please check if interested in helping!)

I am interested in Fund-raising information: _____

To be completed by Union Staff on the day of Registration

Uniform number Preference:1) _____ 2) _____ 3) _____

Jersey Size (woman's xxs-xl): Short Sleeve _____ Long Sleeve _____

Tee-shirt Size(Youth Sizes): _____ Adult Sizes: _____

Short Sizes: _____ Shoe Size: _____

Warm-up: pants _____ Jacket _____



For registration information email: rodney@unionvolleyball.com or call **937-271-0970**

www.unionvolleyball.com