## **Bearden Middle School Tryout Registration**

Today's date://
Player Information (player and/or parent fills out this portion)
Name:
Age: Current Grade:
Have you ever played volleyball on a team? (Circle one) Y/N
If yes, what year and where did you play?
How long have you played volleyball (how many seasons)?
Player skills (player fills out this portion)
What are you strengths/what are you best at?
What are your weaknesses/what do you need to work on getting better at?
Required: Parent/Guardian Contact Information (If player is selected, this information will be used for team communications)
Name(s)
Cell #
Email
**Please state if one or both parent/guardians should be included in team communications (GroupMe/Email/Text). Thank you!

EVALUATION FORM (for Coaches/Evaluators only)
Participant's Name-

Date	/	/	

TRYOUT# Evaluators, please circle the number that best identifies the player's skill level for each skill-(5 is best/highest, 1 is lowest/skill is absent). Make any comments below for each skill. Passing-Setting-Serving- 1 Hitting-Footwork- 1 Attitude-(player's attitude toward others, toward instructors, and toward the tryout process) Coachable-(ability to receive critical/instructive feedback and produce an improved/corrected response)