

# NEW ORLEANS HURRICANES 2007 TRYOUT FORM (PLEASE PRINT)

**NOTE: Each player MUST present this SIGNED tryout form and a copy of the USA Volleyball Individual Membership (completed ON LINE at [www.bayouvolleyball.com](http://www.bayouvolleyball.com). The cost of tryouts is \$50.00 BEFORE 11/01/06 or \$60.00 on site and will be required prior to participation.**

Player's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_, Louisiana, Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Parent's Email: \_\_\_\_\_

Player's Email: \_\_\_\_\_

Team & Level Trying Out:      BLUE                      WHITE                      Age Group: \_\_\_\_\_  
(Must play based on age on 8/31/06, may play older if you wish)

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Years Played: \_\_\_\_\_

School Coach: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Mother: \_\_\_\_\_ Father: \_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_ Employer: \_\_\_\_\_

Emergency #: \_\_\_\_\_ Emergency #: \_\_\_\_\_

Parents please indicate involvement/s willing to accept with your initials:

\_\_\_\_\_ Fundraising                      \_\_\_\_\_ Travel Committee                      \_\_\_\_\_ Tournament Committee

\_\_\_\_\_ Uniforms (Sizing & Distribution)                      \_\_\_\_\_ Team Parent (Communication)

**I RELEASE METAIRIE PARK COUNTRY DAY SCHOOL FROM ANY INJURIES THAT MAY OCCUR ON NOVEMBER 12, 15, or 18, 2006, DURING THE NEW ORLEANS HURRICANES TRYOUTS. I AUTHORIZE THE DIRECTORS TO SECURE ANY EMERGENCY TREATMENT DEEMED NECESSARY.**

**PARENT OR GUARDIAN:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

(This must be signed or the individual under the age of 18 WILL NOT be allowed to participate.)