



Player Information Sheet

Player Information:

Last Name: _____ First Name: _____

Street Address: _____ Home Phone: () _____

City: _____ Zip: _____ Player Cell Phone: () _____

School Name: _____ Grade: _____ Date of Birth: _____

Player Email: _____ NCVA Membership # _____

Height ___ft. ___in. Right/Left Handed (circle one)

Experience Level: _____ Position: _____

Is BAVC Your First Choice of Clubs Y / N

Are you trying out for any other clubs? If so, which ones? _____

Who Should Contact First for Offer (circle one): Player Mother Father

Parent Information:

Mother: _____ Father: _____

Email: _____ Email: _____

Cell: _____ Cell: _____

Emergency Contact (other than parent):

Name: _____ Phone: _____

Relationship to Player: _____

Any Known Scheduling Conflicts:
