

SA EMPIRE Volleyball Club
2025-2026 Club Tryout Registration Form

Circle one: **LOCAL** **REGIONALS** **NATIONALS** Age Group: _____

PLAYER INFORMATION

Last Name _____ First Name _____

Address _____ City _____ Zip _____

Player's Cell Phone _____

Player's Email: _____ **Grade** (School Year 2025-2026): _____

BirthDate: _____ **Age** (as of **01 July 2026**): _____

Years Playing Club: _____ Other Sport(s): Circle **Yes / No** If yes, please list: _____

PARENTS' INFORMATION

Mother/Legal Guardian Name _____

Mother's Email Address _____

Preferred Contact Phone Home () - Cell () - Other () -

Father/Legal Guardian Name _____

Father's Email Address _____

Preferred Contact Phone Home () - Cell () - Other () -

EMERGENCY CONTACTS

In case of emergency, please contact:

Name _____ Phone () - Relationship to player _____

CONSENT FOR PLAYER TO PARTICIPATE AT TRYOUT DAY/ LIABILITY WAIVER ACKNOWLEDGMENT

Signature of Parent or Legal Guardian

Date

PAYMENT INFORMATION

Tryout Fee (non-refundable): \$30 per player (returning player) \$55 per player (new member)

Paid Online	Pay by Cash	TRYOUT NUMBER / by Staff Only
If payment was made online, get confirmation from staff prior to tryout. Cash App: \$SAEMPIRE RSVP: saempirevbc@gmail.com		

****A non-refundable financial payment of \$500-\$600 (depending on team) is due upon selection and acceptance of position on a team. **Spots will not be held without payment**