



# 2010 Tryouts

For Region Use Only

## Farrington High School Gym \* Sunday - April 11, 2010

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Year of HS Graduation: \_\_\_\_\_ Aloha Region USAV No.: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Athlete's Email: \_\_\_\_\_

### TEAM TRYING OUT FOR:

- Girls' International Youth (Born in 1994 & after)
- Girls' National Youth (Born in 1994 & after)
- Girls' National Select (Born in 1996 & after)
- Boys' International Youth (Born in 1992 & after)
- Boys' National Youth/Select (Born in 1993 & after)

**\$10 Pre-Registration (by 04/09/10)**  
 Must be a current USAV Aloha Region member.  
**\$15 Walk-in Registration** with USAV AH Card  
**\$20 Walk-in Registration** without USAV Card

### POSITION (Mark only one):

- SET=Setter
- OH=Outside Hitter
- MB=Middle
- LIB=Libero

### CLUB/SCHOOL INFORMATION:

Club Name: \_\_\_\_\_  
 Age Group: \_\_\_\_\_  
 Club Coach Name: \_\_\_\_\_  
 School: \_\_\_\_\_  
 School Coach Name: \_\_\_\_\_

### RACIAL/ETHNIC HERITAGE (Optional):

- Asian
- Caucasian
- American Indian or Alaskan Native
- Native Hawaiian or other Pacific Islander
- Hispanic or Latino
- Two or more races
- Black or Afician American
- Other: \_\_\_\_\_

Mail Pre-Registration Form and Payment To:  
  
**USAV ALOHA JUNIORS**  
**45-205 Ka-Hanahou Circle**  
**Kaneohe, HI 96744**

I agree to participate in this tryout and allow USA Volleyball-Aloha Region to utilize my photograph or any likeness of me created from my participation in USA Volleyball sanctioned events or programs, with my approval in advance of such use, and without financial or other compensation due to me.

Athlete Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

(If Junior Member is under 18 years of age)