



VOLLEYBALL

Team Saskatchewan

Athlete Tryout Registration

TRYING OUT FOR THE FOLLOWING: (please circle)

MALE FEMALE

BANTAM MIDGET JUVENILE

LOCATION: _____

ATHLETE INFO

NAME	AGE	DATE of BIRTH
ADDRESS		
TOWN/CITY	PROVINCE	POSTAL CODE
TREATY REGISTRATION #	SK HEALTH #	PHONE #
EMAIL		
PARENT/GUARDIAN NAME		RELATIONSHIP TO YOU
ERMEGENCY CONTACT		PHONE #

NO PERSONAL CHEQUES WILL BE ACCEPTED. ALL MONEY ORDERS CERTIFIED CHEQUES CAN BE MADE PAYABLE TO "FSIN".

OFFICE USE ONLY:

PAYMENT TYPE: Cash Cheque Money Order	AMOUNT:
NAME OF PAYEE:	
PAYEE BANK:	CHEQUE NUMBER:
RECEIPT ISSUED? Yes No	

