2025 Top Gun Volleyball Club

ELITE TEAM Tryout Permission/Waiver Form

Pre-registration highly recommended. Email topgunjen@yahoo.com with Name, Age, Grade. Tryout fee of \$50.00 plus this completed form (signed by parent/guardian) is then required for tryouts (cash or check made payable to Top Gun VBC). Pre-registration less than 24 hours prior to tryout or walk-up is \$60.00 fee and this completed form. Please fill out completely.

Athlete's Information		
Name	Date of Birth/_	/ Age
Address	City	Zip
School Name Grade _	Position	T-shirt Size
Home Phone Number (Top	Three Uniform Number C	Choices
Please send email communication to:		
Father's Information	Mother's Information	
Name	Name	
Phone ()	Phone ()	
physical health and has my permission to participate emergency, I hereby authorize the Top Gun VBC standical attention they deem necessary for the heal may be contacted. I also hereby assume responsibility I recognize there are risks involved with my daughte Covid-19 and I hereby release the Top Gun VBC, the Schools, their staff and associates, Brighton Area Stability in the event of any illness or injury arising or participation in the Top Gun volleyball tryout.	raff to act on my behalf th and safety of my dan bility for any and all pay er's participation in this neir staff and associate schools, their staff and	to secure any and all ughter until such time that I ment of such treatment. tryout, including the risk of es, along with Howell Public associates of any and all
My daughter's known allergies are		
Any medical condition(s) the staff should know about	ut?	
Parent Signature		Date
Emergency Contact Information During Tryout (after parents):	
Name Ph	one Number ()
Name Ph		
☐ We understand this tryout is for a Top Gun commitment at a cost of \$2850.00. This teat Nationals in Orlando, FL in June. We undetwhat Club/Team did you play for last year?	am would require son	me travel and will attend