



2007-2008 Viati Player Information Form
www.ViatiSC.com

PLAYER'S NAME _____ AGE GROUP _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

HOME PHONE(_____) _____ CELL(_____) _____ EMERGENCY(_____) _____

SSN#- _____ BIRTH DATE _____

INSURANCE CO _____ POLICY NO _____

MOTHER'S NAME (FIRST/LAST) _____

MOTHER'S EMPLOYER _____

MOTHER'S WORK#(_____) _____ MOTHER'S CELL(_____) _____

MOTHER'S EMAIL ADDRESS _____

FATHER'S NAME (FIRST/LAST) _____

FATHER'S EMPLOYER _____

FATHER'S WORK#(_____) _____ FATHER'S CELL(_____) _____

FATHER'S EMAIL ADDRESS+*****+ _____

PLAYER HEIGHT _____ WEIGHT _____ SIZE:(SHORT) _____ (SHIRT) _____

SCHOOL YOU ATTEND _____ GRADE _____ GPA _____

VOLLEYBALL EXPERIENCE (# OF YEARS): JV _____ VARSITY _____ CLUB _____

VB POSITION: PRIMARY _____ SECONDARY _____

OTHER SPORTS: SCHOOL _____ COMPETITIVE _____

DO ANY OF THE ABOVE SPORTS CONFLICT WITH THE USAV SEASON? _____

ATHLETIC ACHIEVEMENTS _____

ACADEMIC ACHIEVEMENTS _____