



TRYOUT CHECKLIST

Last Name

First Name

Middle Initial

Upon making a team, these forms are required:

_____ Copy of Birth Certificate

_____ Concussion Acknowledgement Form Signed

_____ SafeSport Form Signed

_____ Medical Release Form Signed

_____ Magnitude Volleyball Club Player Contract Signed

_____ Uniform Sizing Completed

_____ Payment

*Commitment Fee (\$600) and Payment Agreement Signed OR Paid in Full (with discount)

FOR CLUB USE ONLY:

Contract Acceptance:

Amount \$ _____ CASH CARD ZELLE Check # _____

_____ Balance due after Commitment Fee Received

Team: _____

Notes:
