

Tryout Sanctioning Form

Boys Division

Girls Division

Club Name: _____ **Contact Name:** _____

Contact Email: _____ **Contact Phone Number:** _____

Club website (if applicable): _____

Club Location: _____

Advertise my tryouts on the NCVA Website: **Yes**, please post **No**, do not post

Age Division (circle all that apply): 18 17 16 15 14 13 12

Tryout Date: _____

Tryout Time: _____

Site Name and Address: _____

Age Division (circle all that apply): 18 17 16 15 14 13 12

Tryout Date: _____

Tryout Time: _____

Site Name and Address: _____

Age Division (circle all that apply): 18 17 16 15 14 13 12

Tryout Date: _____

Tryout Time: _____

Site Name and Address: _____

Age Division (circle all that apply): 18 17 16 15 14 13 12

Tryout Date: _____

Tryout Time: _____

Site Name and Address: _____

Age Division (circle all that apply): 18 17 16 15 14 13 12

Tryout Date: _____

Tryout Time: _____

Site Name and Address: _____

List all adults that will be present at Tryouts:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you charge to attend your tryouts? Yes No If yes, the cost is \$ _____

**** All steps included in the Tryout Procedure must be completed before your club tryouts will be sanctioned by the NCVA.**