



2007 Individual Tryout Application

For official use only

Insurance copy _____ Fee Paid _____ Fee waived _____ Tryout Number _____
Forms complete: Info _____ Waiver _____ Letter _____ Confidentiality _____
Info given: Info _____ Fact Sheet _____ INT

Please answer the following questions as completely as possible. Thank you!

BASIC INFORMATION

Name _____
Address _____
City _____ State _____ Zip _____
Phone# _____ Work# _____ Cell# _____
e-mail: Personal _____ Work _____
SSI# _____ DOB _____
Driver's License# _____ State _____ Class _____ Exp Date _____
Height _____ Weight _____
Emergency Contact Person _____ Phone# _____

EDUCATION

College attended _____ Graduate? Yes _____ No _____
College Sports Experience _____
High School Attended _____ Graduate? Yes _____ No _____
High School Sports Experience _____

EMPLOYMENT/MEDICAL INFORMATION

Employer _____ Title _____
Work Days and Hours _____
Can you take phone calls at work? Yes _____ No _____
Do you have any special skills? _____
Health Insurance Provider _____
Policy Number _____
Do you have any health conditions? _____
Do you take any medications? Yes _____ No _____ If yes, please list: _____
Blood Type _____ Allergies _____
Name of regular physician _____
Address _____

SCHEDULE

Are you available weeknights and some Saturdays for practice? Yes _____ No _____
Will you be available to do kids football clinics on weekends? Yes _____ No _____
Will you be available to do in-school presentations on weekdays? Yes _____ No _____
Will you be available to do community work? Yes _____ No _____
Do you have kids? Yes _____ No _____ How many kids? _____ Ages _____

EQUIPMENT INFORMATION

Do you have football equipment? Yes _____ No _____
If yes, please list: _____

If no, equipment sales representatives will be available during training camp.

Uniform/gear information:

Shirt size _____ Hat size _____ Shorts /Pant size _____

Uniform Measurements:

Waist _____ Inseam to ankle _____ Inseam to knee _____

COMMUNITY RELATIONS

Would you like to participate on one of the following committees?

Fundraising _____ Kids programs _____

Public Relations _____ Event Coordination _____

Please describe how you might best assist the team in achieving its goals, on and off the field:

SOURCE

Where did you first hear about the Sirens? _____

What prompted you to tryout for the team? _____

