



GRAND LEDGE HIGH SCHOOL VOLLEYBALL TRYOUT PACKET

Welcome to Grand Ledge High School Volleyball!

Important:

All players **MUST** have MHSAA Physical Exam Forms signed by their physician on file in the GLHS Athletic Office **prior** to tryouts on August 10, 2011. (These forms are available on our website at www.glvolleyball.com under the high school link, as well as in the high school athletic office.) Turn your physical form into the athletic office by Friday, August 5.

Checkout the Volleyball Booster club on Facebook under Grand Ledge Volleyball Club!

Any player who does not have their physical form on file, will not be allowed to tryout.

Tryout Dates: Wednesday, August 10 – Friday, August 12 Location: GLHS Main Gym

August 10 <u>High School – Tryouts</u> All levels: 9 am-11 am Varsity 2 pm-4 pm JV 3 pm-5 pm Freshman 4 pm-6 pm	August 11 <u>High School – Tryouts</u> Varsity 8 -10 am & 2-4 pm JV 9-11 am & 3-5 pm Fresh. 10am-12 pm & 4-6 pm	August 12 <u>High School – Tryouts</u> Varsity 8-10 am & 2-4 pm JV 9-11am & 3-5 pm F 10 am-12 pm & 4-6 pm
--	--	--

On behalf of the Grand Ledge Volleyball Booster Club and the GLHS volleyball coaches we thank you for your interest in trying out for the girls high school volleyball program. This sheet is intended to help provide you with the information you will need during tryouts and throughout the season.

The packet includes:

GL Player Tryout Info Sheet	(turn in on first day of tryouts 8/10)
Uniform Agreement	(turn in by last day of tryouts 8/12)
Photo Order Form	(turn in by parent/player meeting 8/16)
Athletic Eligibility Form	(turn in to Athletic Office BEFORE first game)

Additional dates that may be helpful to note:

Mandatory Parent/Player Meeting	Tuesday, August 16, at 6:00 pm	GLHS Gym
Team Picture Day	Wednesday, August 17 at practices	GLHS Gym
First Regular Season Game	Tuesday, August 30 F/JV-5 pm, V-6 pm	Sexton HS Gym

At the mandatory parent & player meeting you will receive additional information about the season, committee sign-up sheets, concession stand sign-ups, and home tournament information. This year in lieu of beverage donations for the concession stand, we are asking for a \$5.00 fee to cover the cost of purchasing those items instead. We thought this may be easier than asking everyone to haul in cases of water/pop/Gatorade. So please bring \$5 cash or a check for \$5 payable to GL Volleyball Booster Club to the meeting. Also, "Pay to play"/Athletic Eligibility forms are included in this packet, but must be completed and turned into the athletic office with your "pay to play" fee prior to the first game.

The photo date for team and player photos is scheduled for the day after the parent/player meeting, on Wednesday, August 17 prior to team practices. Photo order forms are attached to this packet and must be completed and turned in with payment no later than the August 16 parent/player meeting. You are under no obligation to purchase photos, however a photo of each player will be taken, along with a team photo for potential use throughout the season. So please bring your uniforms to picture day!

If at anytime you have questions or concerns, you may contact:

Varsity Coach	Bob Alim-Young	(517) 303-9812	talonsdad@comcast.net
---------------	----------------	----------------	-----------------------



GRAND LEDGE HIGH SCHOOL

Girls Volleyball

Player Tryout Information Sheet

PLAYER NAME: _____
(First Name) (Last Name)

Team (circle): Freshman JV Varsity GLHS Locker # _____

Address: _____ City: _____ MI_ Zip _____

Home phone: _____ Player Cell: _____

Permission to receive text messages? _____ Yes _____ No

Player email: _____

MOM'S NAME: _____

Mom's cell: _____ Text Messages: _____ Yes _____ No

Mom's email: _____

Mom's work phone: _____

Best # to call for emergency or urgent needs: _____ Home _____ Cell _____ Work

_____ I am interested in serving as a team parent. _____ I am interested in volunteering overall.

DAD'S NAME: _____

Dad's cell: _____ Text Messages: _____ Yes _____ No

Dad's email: _____

Dad's work phone: _____

Best # to call for emergency or urgent needs: _____ Home _____ Cell _____ Work

_____ I am interested in serving as a team parent. _____ I am interested in volunteering overall.



Volleyball Uniform Agreement

The Grand Ledge Athletic Department and the Grand Ledge Volleyball Booster Club have invested in jerseys, warmups and bags for the volleyball teams. It is expected that players care for these items with respect and properly represent their school. It is considered a privilege to wear the uniforms and warmups. These items are the property of the Grand Ledge High Volleyball Booster Club and must be returned in good condition at the end of the season. Policies and instructions concerning the uniforms are as follows:

Jerseys and warmups are not to be worn by anyone other than the player that they are issued to. This includes teammates, family, friends, etc.

Jerseys and warmups are not intended for wear other than matches, scrimmages or activities approved by coach(es).

Jerseys must be washed after every game. Wash in warm water with mild soap. Rinse in cold water. Do NOT use fabric softener. AIR DRY on hanger (NO DRYER)! Do not iron jerseys!

Uniforms should be removed from gym bags upon returning home after games in order to prevent odors and mildew.

All items checked out will be returned immediately following the final game played in the season. Designated team parents will collect your items and credit you with returning them. They will assess that all items have been returned and note their condition. If there are any fees to be paid for damaged or missing items you will not be allowed to attend banquet, receive any awards or letters, or your player scrapbook, until those fees are paid in full. Players that neglect to return any items will be assessed for each item missing, and are subject to additional consequences by the Grand Ledge Athletic Director.

The cost for replacement of the items are:

\$50 per jersey

\$75 per warmup

\$50 per gear bag

Before being issued player uniforms, this agreement must be signed and submitted.

Player Name _____ Jersey # _____
(Last name) (First name)

Level: (circle one) Freshman Junior Varsity Varsity

I agree to the terms and conditions listed in this document. It is understood that my player and I will be responsible for damage to any items as a result of improper care, including laundering or neglectful actions. It is understood that most cases of damage will require replacement of the jersey, warm-up, or bag. I understand that signing this agreement is mandatory prior to distribution of any items and for participation in the soccer program at Grand Ledge High School.

Player Signature _____ Date: _____

Parent Signature _____ Date: _____

GL Volleyball Pictures \$25/Pkg.

Please make checks payable to Diane Horanburg.

Check here if you would like the **Standard Package** which includes:
2 Buttons, 1-5x7 and 4 wallets (Player Photo), 1-5x7 (Team Photo)
Also included is a CD of your player's individual and team pictures
which allows you to make more prints on your own.

I know this will create more work on my part & perhaps some confusion on your part, but I'm trying to give you more options than the standard package so you can spend your hard-earned money to suit your needs.

Options below allow you to modify the standard package.

Check here if you want both of the 5x7s to be of your player instead of 1 team photo.

Check here if you want 1-8x10 instead of 2-5x7s

I would like the 8x10 to be of the team OR

I would like the 8x10 to be of my Player

Substitute one button for 1 of the following, or both buttons for 2 of the following:

I only want one button (check one of the following replacements)

I don't want any buttons (check two of the following replacements)

	Team	Player alone
<input type="checkbox"/> One 8 x 10	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Two 5 x 7s	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> One 5 x 7 & 4 wallets	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Eight wallets	<input type="checkbox"/>	<input type="checkbox"/>

If you need more buttons, add \$3 for each one. Number of additional buttons: _____

Please print legibly so I can read your name and remember your player number. Thanks.

Player's Name _____
Player # _____ FROSH _____ JV _____ Varsity

Questions? Call (517) 202-3715 or email Diane@DianeFamilyPhoto.com

Make checks payable to: Diane Horanburg

Required to Complete for each sport: Athletic Eligibility/Emergency Information (Use pen: Write Clearly)

This form and an MHSAA physical exam form must be on file in the athletic office prior to the student's practice. A student will not be eligible to represent the Grand Ledge School District in any athletic event without this paperwork. Fill each of the four section out completely.

1. Eligibility Information:

New student to the district this year ? _____ If yes, date of enrollment _____.

Circle: (Male) (Female) **Trying out for:** (Varsity) (Junior Varsity) (Frosh) (Middle School)

This form is for one season: (Fall) (Winter) (Spring)

Is your MHSAA physical form on file in the athletic office? _____ **SPORT** _____

Name _____ Birthdate ____ - ____ - ____ Grade _____

Address _____ City _____ Zip _____

Home Phone (____) _____ Home email: _____

2. Emergency Information:

Student lives at the above address with: Circle one: Both Parents Mom Dad Guardian

First and Last name of parent you live with _____

Mother's Place of Employment _____ Wk Phone _____ Cell _____

Father's Place of Employment _____ Wk Phone _____ Cell _____

Who should be called in case of emergency if neither parent can be reached?

Name _____ Relationship _____ Phone _____

Family Doctor _____ Phone _____

Name of Insurance Company _____ Detail any special medical information (allergies, known drug reactions, asthma, currently prescribed medications, etc.) _____

3. Fee (Checks made payable to Grand Ledge Athletic Department)

There is a registration fee for entrance into the competitive athletic programs offered by Grand Ledge Public Schools. **This fee is \$100.00 per sport for high school and middle school students and include the club sports sponsored by the athletic department that fall under MHSAA guidelines. (Hockey, Gymnastics, Lacrosse, Water Polo).** This fee will be paid prior to the first contest date of each sport. Your money will be refunded if your child is cut from a team. Lack of playing time will not be criteria for a refund. No student will be ineligible to participate in athletic programs solely due to an inability to pay. Students/parents may make application for a payment plan or a waiver by checking below. This will be considered confidential, but shall be available to appropriate school personnel for processing. Students will be allowed to practice while requests are considered and processed.

I would like to discuss payment arrangements: _____

I would like to request a waiver of registration fees and have made application for the Federal Lunch Program _____

Registration Fee is attached: ____ Cash (accepted by _____) ____ Check (# _____)

I understand that my signature indicates I give permission for my child to participate in the sports program offered above and I agree to pay the participation fee unless a waiver is granted. My signature also gives consent for the NAA Certified Trainer and the team physician to attend to my child in the event of injury. It also allows the school to publicize and print athletic information that includes data about my child.

4. Parent Signature _____ required.

Athletic Department-Top White Original

Coach Retains 2nd/Yellow copy so that the phone numbers are available at practices and at away contests.