Trevian Girls Softball Association
Player Registration

Tryout Number _____
Official Use Only

Player's Name _____ Date of Birth _____

Parent Name _____

Parents' Phone (home) _____ (cell) _____

Address _____ City _____ Zip Code _____

Email Address _____
(where you would like to be contacted throughout the year)

I want to be considered for the Blue (A) Team: Yes _____ No _____

I would like to tryout for: Pitcher _____ Catcher _____

Based on my soccer, piano, gymnastics, whatever schedule, I will have a hard time making practices/ games at the following times (Example: soccer games on Sundays through (date); also indicate if these will stop when school's out, or start when school's out, etc.)

Enter type of event, month, and day: (e.g., lacrosse games, Sunday through June and practices Tue and Thur 5 - 6:30)

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No Conflicts _____ Not Sure _____

My family vacation, camp, etc., schedule this summer means I will be out of town: *(please cover the period from May 15 through August 5)* _____

_____

Please Return Application with $10 fee payable to TGSA (prior to tryouts, if possible) to:

Susan Quigley, 2006 Greenwood, Wilmette, IL 60091

Tryout Date January 26, 2008 at New Trier High School, Winnetka.

Age 10 and Under Tryouts: 2:00pm - 4:30pm *(please arrive 15 minutes early)*

Age 12 and Under Tryouts: 4:30pm - 7:00pm *(please arrive 15 minutes early)*