** Player Tryout Form**

**Thank you for the interest in our teams. We look to help develop and mold your player to be the best they can be, on and off the field. Please fill out the below, so we can eliminate this process during tryouts. Thanks!**

**Player Last Name:**

**Player First Name:**

**Date of Birth:**

**Projected High School Grad Year:**

**Projected High School:**

**Positions:**

**Mother Name (First and Last):**

**Mother Mobile:**

**Mother Email:**

**Father Name (First and Last):**

**Father Mobile:**

**Father Email:**

**OR –**

**Legal Guardian Name (First and Last):**

**Legal Guardian Mobile:**

**Legal Guardian Email:**

**If any questions, please reference the age division of your player.**

**Please contact us:**

protravelball@gmail.com **OR 864-334-8670**