



## USL PDL Tryout Application

**PLEASE NOTE: THERE IS A \$50.00 (cash or check) TRYOUT FEE THAT WILL GUARANTEE THE PLAYER ONE (1) TRYOUT SESSION.**

**NO REFUNDS WILL BE ALLOWED AND NO EXCEPTIONS!**

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Secondary Phone Number (cell): \_\_\_\_\_

Email Address: \_\_\_\_\_

PLEASE WRITE CLEARLY AS THIS IS THE PRIMARY METHOD OF CONTACT

Are you a US Citizen?:    Y        N        If not, do you have a green card?    Y        N

Position Played: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Please list any injuries you have had over the last three (3) years: \_\_\_\_\_

### **Professional Experience:**

Club and League: \_\_\_\_\_ Years at Club: \_\_\_\_\_

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### **College Experience:**

College Attended: \_\_\_\_\_ Years Played: \_\_\_\_\_

### **High School Experience:**

High School Attended: \_\_\_\_\_ Years Played: \_\_\_\_\_

Tryout Payment: Date: \_\_\_\_\_ Check: \_\_\_\_\_ Cash: \_\_\_\_\_

Player Signature: \_\_\_\_\_