

NUF VOLLEYBALL CLUB

2025 Player Questionnaire

Player Information: *please write so we can read it.*

Name: _____

Address: _____

City: State: Zip: _____

Phone: _____ Birthdate as of December 2024: _____

School: _____ Grade **NOW:** _____

Email Address: _____

Parent / Guardian Information ONLY:

Name: _____

Address: _____

Phone: _____

Email Address: _____

Player's answer below here:

What is your goal for the 2025 club season? _____

Position you play on your school team: _____

Position you wish to play in 2025: Why?

Previous club

experience: _____

Do you wish to be on the highest team possible regardless of playing time or position?