

# 2020 Buckeye Volleyball Club Athlete Profile Form Buckaneers

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

**Age Group:** (circle)      **10**      **11**  
(Please refer to the OVR Age Definition Policy under the forms tab on our website)

**School:** \_\_\_\_\_      **Current Age:** \_\_\_\_\_

**Grade:** \_\_\_\_\_      **Birth Date:** \_\_\_\_\_      **Height:** \_\_\_\_\_

**Position(s) :( circle)**      **Outside Hitter**      **Middle Hitter**      **Setter**  
   **Libero/DS**      **Opposite Side Hitter**

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_      **Player Cell #:** \_\_\_\_\_

**E-mail Address:**      Parent/Legal Guardian(s) \_\_\_\_\_

   Player's: \_\_\_\_\_

**Parent's Names:**      Mother: \_\_\_\_\_      Father \_\_\_\_\_

   Cell #: \_\_\_\_\_      Cell #: \_\_\_\_\_

**Volleyball Experience:** (# of Years)      Club: \_\_\_\_\_      School: \_\_\_\_\_

**Name of Club:** \_\_\_\_\_

**Please send \$200 to hold a spot**  
**Make checks payable to Buckeye Volleyball Club**  
**Send to: Buckeye Volleyball Club, 6810 Oak Creek Drive, Columbus, Ohio 43229**