



Timber Barons Tryout Registration Form

Name: _____

DOB: ____/____/____ Sex: Female ____ Male ____

Parent/Guardian Name: _____

Home Address: _____

Parent/Guardian Email Address: _____

Parent/Guardian Phone: _____

Are you currently on a Timber Barons Team? Yes ____ No ____

If so who is your coach? _____

I have read the Timber Barons tryout guidelines (please initial) _____