SWSC Exceptional Player Request Form



SWSC for the up coming, 20, so understand that my son/daughter must attend tryone) to allow the Club's evaluators the opportunity tryouts, the Player Selection Committee, in consist considers the best choice for your child. All de	ccer year. I have read outs for BOTH age g ity to see my child plant ultation with both age	I the policy on the Club website. I roups (their own and the higher ay in both environments. After
Prior Year Club:		
Prior Year Team		_ (include "U" level)
Prior Year Coach:		_
Player Name:		
Player Phone #:	Email:	
Player Birthday:	_ Player Age:	
Age group I wish my child to play:		
I wish for my child to "play up" at a higher age bracket because:		
Parent Signature:	Date:	

PLEASE BRING THIS FORM TO TRYOUTS

or

SEND TO THE COACH OF THE DESIRED TEAM or THE SWSC REGISTRAR P.O. Box 2459, Wilton, NY