



NON-ROSTERED PLAYER INFORMATION SHEET

____ Men's Softball ____ Women's Softball ____ Coed Softball

____ Men's Volleyball ____ Women's Volleyball ____ Coed Volleyball

____ Men's Basketball ____ Women's Basketball

NAME: _____

ADDRESS: _____

TELEPHONE: _____ (H) _____ (W)

HEIGHT: _____ WEIGHT: _____ AGE: _____

POSITIONS PLAYED: _____

EXPERIENCE/LEVEL OF COMPETITION:

COMPLETE FORM AND RETURN IT TO BPRD OFFICE, 400 EAST FRONT,
OR PLACE IT IN FOLDER. FORMS WILL BE REMOVED AT COMPLETION
OF CURRENT SEASON.