



**TRYOUTS & PRACTICES ARE CLOSED. NO SPECTATORS/SCOUTS/AGENTS**

AMERICAN BASKETBALL ASSOCIATION (ABA) AND PG VALOR BASKETBALL

*Please be sure to complete the following forms in their entirety. We are not responsible for mistakes due to illegibility.*

- 2021-2022 Player Tryout Registration Form
- COVID Waiver
- Registration Fees (All registration fees are MANDATORY & NON REFUNDABLE)

\*\*\*Without completed forms and paid fees you are not registered and will not be permitted to tryout

\$100 in advance \$150 at the door

**DURING TRAINING CAMP/SEASON STARTS ALL REGISTRATIONS ARE \$175**

**All fees not paid online must be paid by cash, CASHAPP or money order on day of and during training camp.**

**No PayPal or personal checks will be accepted.**

Were you referred to the team by someone? \_\_\_\_\_ If yes, who? \_\_\_\_\_

If no, how did you find out about the team \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ LBS Position 1 2 3 4 5 (please circle all that apply)

**PERSONAL & EMPLOYMENT DATA:**

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ Suffix \_\_\_\_\_

Email Address \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Home

Address \_\_\_\_\_ Apt \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Cell ( ) \_\_\_\_\_

US Citizen [ ] Yes [ ] No Do you have health insurance? \_\_\_\_\_

Current Employer and/or School \_\_\_\_\_ [ ] Full Time [ ] Part Time

**PLAYING EXPERIENCE:**

High School [ ] Yes [ ] No If yes, what year(s) \_\_\_\_\_ Position \_\_\_\_\_

School \_\_\_\_\_

College [ ] Yes [ ] No If yes, what year(s) \_\_\_\_\_ Position \_\_\_\_\_

School \_\_\_\_\_

Professional [ ] Yes [ ] No If yes, what year(s) \_\_\_\_\_ Position \_\_\_\_\_

Team(s) \_\_\_\_\_

**PLAYER SIGN \_\_\_\_\_ DATE: \_\_\_\_\_**

**NO WAIVER-NO MASK-NO REGISTRATION FEES=NO TRYOUT. NO EXCEPTIONS**

For Office Use: Registration # \_\_\_\_\_