

# Austin Wildcats Boys Tryouts Spring 2017

Please type or print clearly

Participant's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Favorite Player \_\_\_\_\_

School/Team (level, A/B/C) \_\_\_\_\_

Playing Time (circle one): Whole Game /  $\frac{3}{4}$  Game /  $\frac{1}{2}$  Game /  $\frac{1}{4}$  Game / Other \_\_\_\_\_

Past Select Team \_\_\_\_\_ Coach \_\_\_\_\_

I have a Wildcats uniform that fits. My jersey number is: \_\_\_\_\_

I need a Wildcats uniform. Jersey Size: \_\_\_\_\_ Shorts Size \_\_\_\_\_

I have part of a uniform and need: \_\_\_\_\_

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Preferred Phone Contact \_\_\_\_\_ Other Phone \_\_\_\_\_, \_\_\_\_\_

Preferred Email \_\_\_\_\_ Other Email \_\_\_\_\_

Other Contact Info: \_\_\_\_\_

## Tryout Session Dates and Times

\$25 Per Session

|  |      |   |
|--|------|---|
| 4 <sup>th</sup> & 5 <sup>th</sup> Grades | 2/26 | 1:00-2:30 at O'Henry Middle School          |
|  | 3/5  | 11:00-1:00 at West Austin Youth Association |
| 6 <sup>th</sup> & 7 <sup>th</sup> Grades | 2/26 | 11:00-1:00 at West Austin Youth Association |
|  | 3/5  | 11:00-1:00 at West Austin Youth Association |
| 8 <sup>th</sup> thru High School         | 2/26 | 2:30-4:30 at O'Henry Middle School          |
|  | 3/5  | 1:00-3:00 at West Austin Youth Association  |

*Payments due at the beginning of each session. Make all checks payable to Austin Wildcats Basketball*

I certify that I am the parent or legal guardian of the participant. I understand that there is an inherent risk of injury with basketball activities. I give Austin Wildcats Basketball Inc. coaches and staff permission to seek appropriate medical attention for the participant, and for the medical attention to be given, and for the participant to receive medical attention in the event of accident, injury, or illness that occurs during Wildcats activities. I will be responsible for any and all costs of the medical attention and treatment.

I, for myself, my heirs, executors and administrators, waive, release, and forever discharge Austin Wildcats Basketball, Inc., the West Austin Youth Association, Austin Independent School District, and their staff, coaches, officers, agents, employees, representatives, successors and assigns, of and from all rights and claims for damages, injury, or loss to person or property which may be sustained during participation in Austin Wildcats Basketball, Inc. activities.

I understand participants will not be allowed to participate unless this form is completed and signed by the parent or guardian of the participant.

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_