



## 2009 PLAYER TRYOUT REGISTRATION

### **PERSONAL & EMPLOYMENT DATA:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Email address \_\_\_\_\_

Social Security # \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_

State of Birth \_\_\_\_\_ Marital Status \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Driver's license \_\_\_\_\_ State of License \_\_\_\_\_

U.S. Citizen Yes [ ] No [ ] Other \_\_\_\_\_

Employer &/or School \_\_\_\_\_ Work/School # \_\_\_\_\_

Occupation \_\_\_\_\_ Full Time [ ] Part Time [ ]

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

Parent's Home Phone # \_\_\_\_\_ Parent's Work # \_\_\_\_\_

Parent's Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Alternative Contact Name & Phone # through which you can always be reached during the tryout period:

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Have you ever been arrested? Yes [ ] No [ ] If yes, provide details? \_\_\_\_\_

### **EDUCATIONAL DATA:**

Name of High School Completed \_\_\_\_\_ State \_\_\_\_\_ Date Graduated \_\_\_\_\_

College/University \_\_\_\_\_ Current Year \_\_\_\_\_

Major \_\_\_\_\_ Minor \_\_\_\_\_

Have you graduated? Yes [ ] No [ ] If yes, when? \_\_\_\_\_

### **PROFESSIONAL PLAYING EXPERIENCE:**

Have you ever played professional basketball? Yes [ ] No [ ]

If yes, when? \_\_\_\_\_ Where? \_\_\_\_\_ With Whom? \_\_\_\_\_

In one sentence, please define the "goal" you hope to achieve as a Springfield Armor player?

\_\_\_\_\_  
\_\_\_\_\_

#### PLEASE BE SURE TO ATTACH ALL THE FOLLOWING:

- Completed Registration Application
- Signed "Waiver & Release Form"
- Disclosure Authorization Form
- Registration Fee in form of Money Order /Cashier's Check

#### MAIL ALL APPLICATION MATERIALS TO:

Springfield Armor Open Tryouts  
1 Monarch Place, Suite 220  
Springfield, MA 01144