

# Paramount Football

# Tri-State Combine

Presented by  
**Pro Performance RX and National Scouting Report**

May 6<sup>th</sup> through 8<sup>th</sup>, 2008  
Pro Performance at Mylan Park, Morgantown, WV  
6:00 PM

- Day 1: Skills testing
- Day 2 and 3: Perform for college coaches in 7-on-7 and position specific drills
- Showcase promoted/participant results made available to all college football coaches
- Showcase at one or several positions
- Players evaluated by professional trainers and scouts for speed, strength, agility

Register online at [paramountscouting.com](http://paramountscouting.com), or by mailing the registration form below.

Registration Fee: Until April 18, 2008 - \$100.00 US per person (nonrefundable).

After April 18, 2008 - \$125.00 US per person (nonrefundable).

Add \$5.00 if using PayPal. Registration fee based on postmark date. No registrations accepted after April 30, 2008. No walk-ups. Participant is not registered until PSB receives payment. Go to [paramountscouting.com](http://paramountscouting.com) for instructions and directions to the field.

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## Paramount Football Tri-State Combine Registration – 2008

Name \_\_\_\_\_ High School Graduation Date: 08 09 10 11 12  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_  
Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_ High School \_\_\_\_\_  
HT \_\_\_\_\_ WT \_\_\_\_\_ Position (s): QB RB WR OL DL LB DB K  
Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ GPA: \_\_\_\_\_ SAT/ACT \_\_\_\_\_

Please register at [www.paramountscouting.com](http://www.paramountscouting.com), or send check/registration form to:  
Paramount Scouting, PO Box 52, Cecil, PA, USA 15321

Local contacts: Rob Cress, Pro Performance RX, 304-983-7761, [rob@properperformancerox.com](mailto:rob@properperformancerox.com)

**PLEASE READ and SIGN BELOW:** I understand that there are risks with participation in the Paramount Football Showcase. I release and discharge Vrana Marketing Group, LLC, Pro Performance RX, the workers, and sponsors from any and all actions, suits, and demands whatsoever in law and equity, including but not limited to the risk of injury from participating in this program. In the event of a medical emergency, I authorize any staff member to seek medical treatment for my child. I certify that my child is in good health and able to participate in all activities. I understand that I must also provide my own medical insurance. By signing my signature below I agree that I have read, understand, accept, and abide by the terms and conditions of the Paramount Football Showcase.

\_\_\_\_\_/\_\_\_\_\_/2008  
SIGNATURE (All players under the age of 18 must have a parent/guardian sign above.)