



Potomac Valley AAU  
Member since 1981

www.classicsbasketball.com

Sign-in Desk Use

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Payment

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Giveaway Given: \_\_\_\_\_

Size (if applies): \_\_\_\_\_

## Classics AAU Basketball Team Tryouts Registration Form 2015-16

Athlete's Name: \_\_\_\_\_

Date of Birth: MO: \_\_\_\_\_ DAY: \_\_\_\_\_ YEAR: \_\_\_\_\_ AGE ON 08/31/16: \_\_\_\_\_

Grade: \_\_\_\_\_ (as of 10/1/2015) School: \_\_\_\_\_

Home Street Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_, \_\_\_\_\_ \_\_\_\_\_

Primary Contact/Home Phone: \_\_\_\_\_

Parent Name(s): Mother: \_\_\_\_\_ Father: \_\_\_\_\_

Mother's Cell Phone: \_\_\_\_\_ Father's Cell Phone: \_\_\_\_\_

Mother's Email: \_\_\_\_\_ Father's Email: \_\_\_\_\_

### MEDICAL WAIVER AND RELEASE

Classics Basketball Inc. and any facilities where tryouts, practices, or games will be played will assume no liability for injury or damages arising from the results of the above named Athlete's participation unless due to the willful misconduct or gross negligence on the part of Classics Basketball, its affiliates, or agents. Due to the strenuous nature of basketball, the Athlete participating and their parents are urged to consult their physician concerning the Athlete's fitness to participate. Basketball presents certain inherent risks and hazards, which the participating Athlete is urged to consider and which the Athlete assumes the outcomes of such risks and hazards.

I hereby approve of the participation of my child, the above named Athlete, in the Classics Basketball tryout program and consent to the emergency medical treatment for my child on my behalf. To the best of my knowledge, there are no physical or other conditions which will interfere with my child's participation.

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### TRYOUT RULES and REGULATIONS

1. I understand that all athletes must live in the Potomac Valley AAU Region, which includes Washington, DC, Northern Virginia (City of Alexandria, Arlington, Fairfax, and Loudoun Counties), and Suburban Maryland (Prince George's and Montgomery Counties).
2. I understand that all Athlete's must tryout and play in their Grade for which they are eligible per AAU Rules.
3. I understand that all Athlete's trying out are eligible for the A or National level team but may not make that team.
4. I understand that Athlete's may not make one of the AAU Club teams and will be offered membership in one of the Classics or Classics affiliates Player Development Programs.

PARENT INITIALS: \_\_\_\_\_