

TORONTO HOOPSTARS

Rep Basketball Tryout Registration Form

\$20 Tryout Fee Paid: YES / NO

Signed Waiver Completed: YES / NO

Player Name: _____

Player ID # for tryouts: _____

Address: _____

Phone Numbers: (Home) _____ (Mobile) _____

Email Address: _____

Previous Rep Team Name (If applicable): _____

Player Birth Date: _____

Parents/Guardians: _____

Disclaimer: I understand that basketball is a full contact sport and that risk of injury (e.g. sprains, strains, broken bones, broken teeth, etc...) or death may occur as a result of participating in the tryout. I have read/understood and signed the accompanying waiver and hold Toronto Hoopstars harmless of any situation that may occur.

Signature of Parent
Guardian: _____

Date Signed: _____

Please complete this registration form and the waiver form and bring it with you along with the \$20 tryout fee. Fee can be paid in cash.

Please print email address clearly so you can be contacted accordingly.

For any questions, please email adam@torontohoopstars.com