

Processing Fee: \$150.00



PERSONAL & EMPLOYMENT DATA:

First Name _____ **Last Name** _____

Middle Initial _____

Home Address _____

City _____ State _____ Zip _____

Home Phone # _____ Cell Phone # _____

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 []

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, please 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, please list experience below:

Year	League	Country	Team Name	MIN/PTS/REB/AST Per Game
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Mail All Materials In To:
Americas Basketball International
2833 Seven Oaks Circle
Vestavia Hills, Alabama 35216



**Americas Basketball International Free Agent
Professional Basketball Camp 2008
WAVIER FORM**

**Please complete one registration form per entry. Registration is \$150.00
per entry.**

Name: _____

Over 21 Under 21 (Requires signature from parent or legal guardian)

Address: _____

City, State Zip Code: _____

Telephone: _____

E-mail Address: _____

Terms and Conditions

You will be required to pay \$150.00. Payments may be in the form of cash, certified check or money order only, **PERSONAL CHECKS WILL NOT BE ACCEPTED.** You may also mail your completed form and fee in advance to Americas Basketball International, 2833 Seven Oaks Circle Vestavia Hills, Alabama 35216

You are required to be covered by medical insurance. By completing this form you are signing confirmation that you are covered by your own health/accident insurance and you are in good health and release Americas Basketball International from all liabilities.

Any and all players participating in Americas Basketball International events, internationally or domestically, do so at their own risk. All players will sign medical release forms, hold harmless re- lease forms and acknowledge that they are in good health and are covered by health insurance.

Americas Basketball International, nor its' management may be held liable to injury or illness. Any players/participants that do not adhere to our code of conduct will be removed with out warning. We will only accept players that can represent the Untied States of America will elegance, poise and class.

**We do not guarantee any contracts or professional signings, only the opportunity to compete and be seen by each team in the league. Any assumption otherwise is unwarranted!
And all participates must send video and basketball bio in.**

ALL FORM MUST BE COMPLETED TO BE CONCERNED