2016-2017 Huskies Tryout Registration Form

Team Trying Out For: ____ 3rd Gr ____ 4th Gr ____ 5th Gr
____ 6th Gr ____ 7th Gr ____ 8th Gr

Player Information:

Player Name: _____

Player Birthdate: _____ Current School Attending _____

Parent/Guardian(s) Name(s): _____

Home Address: _____

Home Phone: _____Other Phone: _____

Team Last Played For: _____

Parents and Players:

Thank you for your interest in trying out for the Huskies.

It is the intent of the Huskies to develop youths into better basketball players and provide an opportunity to learn the fundamentals of the game in order to help prepare them for high school basketball. The Huskies team is a select team that will be made up of students currently attending or living in the West Allis-West Milwaukee school district. Huskies players will be given the opportunity to excel with the help of coaching that will emphasize skill development, attitude development, team play and sportsmanship.

By signing below, I/We understand that:

- Not everyone who tries out for the team will make the team.
- There is a significant time commitment to the team and teammates (September-March).
- This is a competitive program. Positions and playing time are not guaranteed.
- Most practices and games are mandatory, missing practices will affect playing time.
- I/We give our approval to the above named candidate for his/her participation in any and all activities during the tryout.
- I/We assume all risks and hazards incidental to such participation and I/We do hereby waive, release, absolve, indemnify and agree to hold harmless West Allis Junior Huskies Inc, its organizers, supervisors and participants.

Player Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

THIS FORM MUST BE COMPLETED AND SIGNED AND TURNED IN <u>PRIOR TO</u> ANY PLAYER PARTICIPATING IN TRYOUTS. NO EXCEPTIONS!