FAIRFAX STARS TRAVEL BASKETBALL PROGRAM

**Tryout Age/Gender:**

**(Registrar to Complete)**

**Player Tryout# Assigned:**

\_\_\_\_\_\_\_\_\_\_\_

**(Registrar to Assign)**

**2017 TRYOUT REGISTRATION FORM**

**$45.00 Registration Fee**

**Registration fee for advanced registration is $35.00. Registration form and payment must be received 1 week prior to first tryout date. Mail to Fairfax Stars, 2801 Glade Vale Way, Vienna, VA 22181. Payment can be made online at** [**www.fairfaxstars.org**](http://www.fairfaxstars.org)**. Registration forms can be emailed to us at fairfaxstars@aol.com or sarahmalone52@gmail.com. There are NO refunds for any registration fees!**

# BOYS Age Group

3rd grade as Fall 2016 3rd grade/9u

4th grade as of Fall 2016 4th grade/10u

5th grade as of Fall 2016 5th grade/11u

6th grade as of Fall 2016 6th grade/12u

7th grade as of Fall 2016 7th grade/13u

8th grade as of Fall 2016 8th grade/14u

9th grade as of Fall 2016 9th grade/15u

10th grade as of Fall 2016 10th grade/16u

11th grade as of Fall 2016 11th grade/17u

\*If a coach plans on playing in AAU events there may be more detailed age requirements.

# GIRLS Age Group

3rd grade as Fall 2016 3rd grade/8u

4th grade as of Fall 2016 4th grade/9u

5th grade as of Fall 2016 5th grade/10u

6th grade as of Fall 2016 6th grade/11u

7th grade as of Fall 2016 7th grade/12u

8th grade as of Fall 2016 8th grade/13u

9th grade as of Fall 2016 9th grade/14u

10th grade as of Fall 2016 10th grade/15u

11th grade as of Fall 2016 11th grade/16u

\*If a coach plans on playing in AAU events there may be more detailed age requirements.

## IMPORTANT – Please Complete Legibly

Child’s Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child’s First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **GRADE \_\_\_\_\_**

Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **AGE \_\_\_\_\_**

City/St/Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County of Residence:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School or Middle School child attends (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HS City/State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(H) Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (H) Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (W) Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Alternate Phone) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Child’s Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Height \_\_\_\_\_\_\_\_\_\_\_ Weight \_\_\_\_\_\_\_\_\_\_\_\_

Dad’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mom’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or Name of Person Completing Registration Form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**INTERNAL USE:**

Paid by Check # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_ Name on check if different from above \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Paid by Cash \_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_ Waiver Form Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Tryout \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_