

ck _____ cash _____ amount _____

2016-17 ABA APPLICATION

Fee & mailing information on back of the application.

NAME: _____ **SCHOOL** _____

first name last name

PHONE NUMBER (best contact # to be on roster) _____

AGE (as of 8-1-16) this is the league you will be in _____ **HEIGHT** _____

must be 6 before 8-1-2016- no exceptions

ADDRESS _____ **CITY** _____

BOY _____ **GIRL** _____ **DATE OF BIRTH** _____ **GRADE** _____

month date year of birth

FATHER'S NAME _____ **phone # to call** _____

MOTHER'S NAME _____ **phone # to call** _____

PLEASE READ & SIGN: A recent physical is recommended to verify that your child is physically fit to participate in ABA Basketball games & practices. There is no league physician and we do not carry health insurance, so it is the parent/guardians responsibility to carry insurance in case of accident or injury. My child is covered by _____ insurance company. Policy number _____

I, the undersigned, verify that my child is physically fit to participate in Henderson ABA Basketball League. We agree not to hold Henderson ABA Basketball or anyone associated with it responsible in case of accident or injury.

Signature of parent/guardian _____ Date _____

NOTE-To keep our teams balanced- **NO REQUESTS** will be granted.

COACH: I would like to coach _____ Phone _____

Please call league director if you want to coach. ALL Coaches will have a background check

SPONSORS: With the rising costs of operating a program, registration alone does not cover the expenses. If you own or work for a business that would be willing to help by sponsoring, call Mary Ann at 270-823-2010 and I will email you a form., The sponsor will have their name on the back of the team jerseys and appear in the paper with the teams weekly scores. Sponsorship is \$200.00 per team.

ABA chooses all-stars at the end of the regular season. ABA are chosen on sportsmanship, ability, and the attitude of the player and parents. If chosen, my child will play all-stars. Yes _____ No _____

Mail Application & Fee To: Henderson ABA
by 11-2 PO Box 464

cks payable to Henderson ABA Henderson, KY 42419

WEB SITE: (Thanks to Chris Staples) www.hendersonaba.com

Please keep this side for reference

TRYOUTS: SUNDAY, NOVEMBER 6

EVERYONE PLAYS.

Every child is placed on a team.

Tryout sites & times are listed on the back.

Tryouts are held for the purpose of balancing a

teams' abilities and talents. To help achieve this balance **NO REQUESTS** will be granted. At tryouts, players will go through a few drills to determine ball-handling and shooting abilities. The player can then leave and will be contacted by a coach.

Teams will be divided through 11-25

As leagues are divided, the rosters will be posted

on the web site www.hendersonaba.com

If you coach has not called by 11-25, please

check the web site and call the coach.

Practice starts the week of Nov 28th

Any questions, call or email your director or

Email question to: abahenderson@gmail.com

Henderson ABA is for students living in or going to school in Henderson County. Anyone no longer in high school is **NOT** eligible to play ABA Basketball. Any student in grades 9-12 on a school team, is **NOT** eligible to play ABA.

AGE: Students must be 6 before 8-1-2016 to be eligible to play ABA. **NO** exceptions.

GAME DATES:

Weekends of Dec. 3. 10. 17

Jan. 7, 14, 21, 28 Tournament Feb. 4, 11

Games for 12-13 Boys are played on Sundays

LEAGUES: Girls 6-7, 8-9, 10-11

Boys 6-7, 8, 9, 10, 11, 12-13, 14-17

FINANCIAL AID:- due to abuse of the old system we are requiring proof of income. Information on the back

ZERO TOLERANCE: Any fan not acting appropriately will be ask to leave the gym. If this happens a second time, that individual will not be allowed to return to ABA games or practices.

