



# 2008 ATLANTA SILVERBACKS OPEN TRYOUT/COMBINE APPLICATION

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**T-Shirt Size:**      **S**      **M**      **L**      **XL**      **XXL**

**Position:** \_\_\_\_\_ **Height:** \_\_\_\_\_ **Weight:** \_\_\_\_\_

**Are you a United States citizen?**  Yes  No

**If you're not a US citizen, do you have a green card?**  Yes  No

**Professional Experience (Include Team/League Division/Years Played):**

---

---

---

**College Experience (Include College Name/Division/Years Played)**

---

---

---

**Circle the tryout session you will be attending:**

December 14-16

January 25-27

February 22-23

**Payment:** Only checks and money orders are accepted. NO cash or credit cards.

**Make checks payable to:** Atlanta Silverbacks

**Mail \$250 combine fee, tryout waiver, and this application to:**

Atlanta Silverbacks Pro Team Combine  
Attn: Jason Smith  
3299 Northcrest Road - Suite 200  
Atlanta, GA 30340

**Refund policy:** Players must attend the tryout/combine in order to be considered. Unless the combine is cancelled by the Atlanta Silverbacks, there will be no refunds.

**Please attach a recent photo to your application.**

*Players must attend all three sessions (Friday 4:30pm-7:00pm, Saturday 11:00am-1:00pm, Sunday 9:00am-11:00am) to be considered for the team. Applications and fees are due at least two weeks prior to the tryout date.*