



## Pro Combine Registration Form

June 16 – 17, 2017

Friday, 6/16 6:30pm – 9:30pm, Saturday, 6/17 9:30am – 3:30pm

Winter Park Community Center in Winter Park, FL

**EARLY BIRD SPECIAL – register before June 10<sup>th</sup> and only pay \$195!**

**\$245 Registration fee which includes:**

Professional evaluation drill sets and testing. Game sets which are filmed and posted on our website and Livestreamed across the world and used by our euro scout when recommending players, pro-testing package, informative seminar on professional basketball related topics to insure an easier transition for American professionals to succeed abroad. An email blast to our global network highlighting standout players, year-round player support from all our staff and guest speakers/scouts/coaches.

### DEMOGRAPHIC INFORMATION:

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Name: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_

Current Phone ( ) \_\_\_\_\_ Mobile Phone: ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_

(Please WRITE LEGIBLY, make sure this email is valid and you have frequent access to it.)

Permanent Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you married? \_\_\_\_\_ Do you have children? \_\_\_\_\_



Do you have a passport? \_\_\_\_\_ From what country? \_\_\_\_\_

Do you have dual citizenship with another country? \_\_\_\_\_ If so, which country? \_\_\_\_\_

If you are not a US citizen, what is your US residency status? \_\_\_\_\_

Your Agent's Name: \_\_\_\_\_

Agent's Phone: (      ) \_\_\_\_\_ Agent's email address: \_\_\_\_\_  
(Please WRITE LEGIBLY)

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**BASKETBALL INFORMATION:**

Position Played: (circle all that apply): 1    2    3    4    5

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Any injuries during career? (List type, date and result)

Any Surgeries?

List any pertinent medical conditions (asthma, diabetes, allergies, etc.)

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**COLLEGE BASKETBALL EXPERIENCE:**

College attended: \_\_\_\_\_ Head Coach: \_\_\_\_\_

Coach's Phone: (      ) \_\_\_\_\_

Coach's Email Address: \_\_\_\_\_

Final Season of eligibility: \_\_\_\_\_

(Participation in this event could impact any remaining collegiate eligibility. Consult your coach or AD if in doubt.)

College Stats/Honors/ Records:



**PROFESSIONAL BASKETBALL EXPERIENCE:**

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Pro Team: \_\_\_\_\_ League/ Country: \_\_\_\_\_ Year(s) with team: \_\_\_\_\_

Additional Information/Comments Regarding Professional Basketball Experience:

**PAYMENT INFORMATION:**

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Select Method of Payment:

- Certified Check or Money Order enclosed (made payable to Winning Ways Pro International Inc.)  
NO PERSONAL CHECKS

- **MasterCard** or **Visa** Card Number: \_\_\_\_\_

Card expiration date: \_\_\_\_\_ Card security code: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Bank transfer also available for more details please contact us today.

**ALL PLAYER MUST SIGN BELOW, REGARDLESS OF PAYMENT METHOD:**

Signature: \_\_\_\_\_

*This form indicates that the player participating authorizes Euro Elite combines & Winning Ways Pro International Inc. to act for them (the player) according to their (WWPI) best judgment in any emergency requiring medical attention and the player hereby releases, exonerates, and discharges both Euro Elite & Winning Ways Pro International Inc. and its employees from any and all action or causes or actions known or unknown resulting in any player injuries while at any of our events.*

**Application Deadline June Combine:** Combine Directors wish to keep the number of chosen professionals to low numbers, all registrations must be in by Wednesday the 15<sup>th</sup> of June with the selected players chosen to attend the Euro Elite combine being informed by Thursday the 16<sup>th</sup>. Chosen players will be then given 48hrs to send full payment to confirm their acceptance and attendance if not received on time it will be given to the next player inline.



All players are admitted on a first-come, first-served basis until the camps are filled. Submission of application does not guarantee acceptance to the camp. Players not accepted will receive a full refund of the application fee. Once a player has registered and been accepted there are no refunds. NO EXCEPTIONS.

**TO REGISTER EITHER**

- Fax Completed Application to toll free : 1-8883072068
- Email [dave@winwayspro.com](mailto:dave@winwayspro.com)

OR

- Mail Completed Application to:  
Winning Ways Pro International, P.O. Box 160835, Altamonte Springs, FL 32716

YOU WILL RECEIVE AN EMAIL CONFIRMING YOUR REGISTRATION UPON RECEIPT

[www.winwayspro.com](http://www.winwayspro.com)  
[Dave@winwayspro.com](mailto:Dave@winwayspro.com)  
**Phone:** 321-439-1199

P.O. Box 160835  
Altamonte Springs, FL 32716

