



**PEACH STATE
BASKETBALL**
www.peachstatehoops.com

Southeastern Hoops Report Player Profile
“The Southeast’s Premier Regional Scouting Service”

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ - _____ Player Cell Phone (____) _____ - _____

Parent/Guardian Name _____ Parent/Guardian Cell Phone (____) _____ - _____

Date of Birth _____ / _____ / _____

E-mail _____ Height ____' ____" Graduation Year _____

School _____ GPA _____ SAT/ACT _____ PSAT _____

School Coach _____ Coach Phone (____) _____ - _____

Coach E-Mail _____

Summer Travel Team _____ Coach Name _____

Coach E-Mail _____ Coach Phone (____) _____ - _____

Shoe Size (men’s): _____ T-Shirt Size: _____ Jersey Size: _____ Short Size: _____

Position: ____ Point Guard ____ 2 Guard ____ Wing Forward ____ Power Forward ____ Center

Please return this sheet to us at:

Peach State Basketball – ATTN: Southeastern Hoops Report – PO Box 1981 Suwanee, GA 30024
FAX to: 1-678-482-5224