



# Basketball Illawarra 2014 Registration Form

NSW Basketball Association LTD  
ABN: 98 003 359 680  
PO Box 198 Sydney Markets NSW 2129  
**Basketball Illawarra**  
www.snakepit.com.au  
admin@snakepit.com.au  
PO Box 7141 Gwynneville NSW 2500  
Phone 4225 9999 Fax 4226 3596

## #Mandatory Fields - Must be filled in.

#Family Name:	<input type="text"/>	#Given Name:	<input type="text"/>	Initial:	<input type="text"/>
Alias:	<input type="text"/>	Occupation:	<input type="text"/>		
#Date Of Birth:	<input type="text"/>	#Sex:	<input type="text"/> Male <input type="text"/> Female		
#Address:	<input type="text"/>				
#Suburb:	<input type="text"/>	#State:	<input type="text"/>	#Postcode:	<input type="text"/>
Phone #'s:	Home: <input type="text"/>	Mobile:	<input type="text"/>		
	Work: <input type="text"/>	Fax:	<input type="text"/>		
Email:	<input type="text"/>				

Registration Number: NSW Assoc Code: \_\_\_\_\_ Number: \_\_\_\_\_ BNSW Number: \_\_\_\_\_ (off rego card)

Registration Paid: \_\_\_\_/\_\_\_\_/\_\_\_\_

Registration

Primary

Secondary

## Please circle all appropriate categorys

**Participation Areas:** Player - Referee / Coach - Manager - Statistician - Table Official - Administrator - Volunteer - Sports Trainer - Social/Associate / Aussie Hoops - Learn To Play - Wheel Chair - Special Needs

#Division:

Club/School:

#Team:

**By joining your local Basketball Association you become a registered participant of NSWBAL**

## RISK WARNING:

**You should be aware that there are risks of injury associated with playing basketball, as there are with most sports. Risks will arise in the context of the activities of running, catching, throwing, shooting and guarding opposing players. While we aim to minimise risks, it is not possible to eliminate them all.**

## CONDITIONS:

I hereby acknowledge that:

as a member of Illawarra Basketball Association Incorporated and a player registered with NSWBAL I agree to act in accordance with their constitutions and by-laws as applicable;

as a general condition of entry into any basketball venue I am required to abide by any codes of conduct that have been issued, published or displayed; and when I participate in any event conducted by under the auspices of NSWBAL I will be bound by their tribunal by-laws

I understand that:

1. All players must be registered before they can commence participating, using the appropriate form and paying the appropriate fee
2. It is a participant's responsibility to ensure that their registration is current
3. If I renew my registration after it has expired than I accept that it may be backdated to when my previous registration expired.

## PRIVACY STATEMENT:

Illawarra Basketball Association and NSWBAL collect your personal information to assist in providing products and services you have requested. If you do not provide this information we may not be able to register you. You can gain access to your personal information by contacting Illawarra Basketball Association on 4225 9999 or PO Box 85 Keiraville NSW 2500 and NSWBAL on 8765 8555 or PO Box 198 Sydney Markets NSW 2129.

From time to time Illawarra Basketball Association and NSWBAL circulate information and special offers to members and registered participants. If you do not wish to receive these please tick this box. ☐

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

#Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**If under 18 years of age this form must be signed by a parent or guardian**

## OFFICE USE ONLY:

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Amount Received \$

Receipt#

Signed:

MYOB Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signed:

Sportzman Entry Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signed: