

## **Basketball Auckland Adults Team Registration Form 2013**

| SHIRT#        | SURNAME  | FI      | RST NAME             | D.O.B     | Home | e PH  | Mobile PH                                  | EMAIL ADDR           | ESS              |             |  |
|---------------|--|---------|----------------------|-----------|------|-------|--|----------------------|------------------|-------------|--|
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|               |  |         |                      |           |      |       |  |                      |                  |             |  |
|               |  |         |                      |           |      |       |  |                      |                  |             |  |
| TEAM NA       | ME (max 2 words)                                       |         |                      |           | SEAS | SON _ |  | GAME TII             | ME PREFE         | RENCE (     | (if any)   |
| PRIMARY       | TEAM CONTACT NAME:                                     |         |                      |           |      |       |  |                      |                  |             |  |
| HM PH:        |  |         | WK PH:               |           |      | МОВІ  | LE:  |                      | EMAIL:           |             |  |
|               | ease circle)<br>OURS: T-Shirts / Singl                 |         | nitec or<br>Shorts   | ASB       |      | TI    | EAM GENDER: (pl                            | ease circle) I       | MENS             | or          | WOMENS   |
| MENS (ASE     | or UNITEC) = \$635 per                                 | team e  | entry for 10 weeks   |           | W    | OMENS | G(UNITEC only) = \$                        | \$585 per team e     | entry for 12     | weeks.      |  |
| Direct Credit | to be made out to Aucklan<br>to- Account Name: Aucklar | nd Bask | etball Services Ltd. | Bank: ANZ |      | Br    | Services Ltd., PO Bo<br>anch: Penrose Acco |                      |                  |             | Reference 'Team Name'                                |
| PAYMENT       | AGREEMENT  orm. I confirm that the parents/gu          |         |                      |           |      |       | team to participate in th                  | e above league and w | vill not hold Au | ckland Bask | eethall Services Ltd. responsible for any illness of |

By signing this form, I confirm that the parents/guardians have given consent for their children who are registered in the above team, to participate in the above league and will not hold Auckland Basketball Services Ltd. responsible for any illness of injury to any team member. The parents/guardians and Team Management have also given Auckland Basketball Services Ltd. consent to collect and retain the information on this form and to use it for the purpose of administration of these competitions. This consent is given in accordance with the Privacy Act 1993.

| SIGNATURE | DATE |
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