



Registration Form for Representative Basketball

Please complete and return to the Registrar. No player is eligible to play until all forms are completed and proof of age provided. Player's Name: Male / Female To assist with uniform ordering, please circle your approximate size: Small Medium Large X Large Have you ever been registered with any other VJBL Representative Club? Yes / No If 'Yes' name of club: Do you have a clearance? Yes / No Do you have permission to train? Yes / No Do you play Domestic Basketball at M.D.B.A.? Yes / No I hereby agree to: Attend all compulsory training sessions and matches. Follow all reasonable instructions of the Coach, Team Manager, and/or Coaching Director at training and games. Wear the team uniform as required by the Coach or Team Manager. Look after the playing uniform I wear. Act in a manner which upholds the M.D.B.A. and suitable to the promotion of good sportsmanship in basketball. I will abide by the player's code of conduct as set out in the Breakers handbook. Signed: (Player) Date:/...../ ______ Address: Postcode: Telephone No: (Home)..... (Work): Mobile No: Mobile No: Email: Email: Mother's Occupation: Father's Occupation: I give permission for my child to participate in Mornington Breakers Representative Program. I authorise officials, coaches, and team managers to obtain for my child any necessary medical treatment by appropriate medical practitioners in the event of injury in my absence and where it is impracticable to communicate with me. I give permission for my child's name and any photos taken of my child to be used for any promotional material by the Mornington District Basketball Association. I will abide by the parent's code of conduct as set out in the Breakers handbook Signed:Parent/Guardian) Date:/......... PTO

