



## **PENRITH BASKETBALL CONTACT FORM:**

This form is for completely new players to the Association. Please fill out the information below and have it returned via email or fax. Our team will do their best to assist you as soon as they can.

FULL NAME: \_\_\_\_\_

PLAYER'S DATE OF BIRTH: \_\_\_\_\_

EMAIL: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

I AM INTERESTED IN THE FOLLOWING PROGRAMS (Please tick the most applicable):

- (        ) – Senior Competition
- (        ) – Junior Competition – U/8 to U/18
- (        ) – Aussie Hoops – Beginner Basketball for 5-12yo

SCHOOL NAME – JUNIORS ONLY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PLAYER HISTORY INFORMATION (Please tick the most applicable):

- (        ) – Played before and coming back?
- (        ) – Brand new?
- (        ) – Some experience?

EXPERIENCE – PLEASE LET US KNOW HOW MUCH EXPERIENCE YOU HAVE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE SEND COMPLETED FORM TO OUR EMAIL OR FAX BELOW**