

ALICE SPRINGS BASKETBALL ASSOCIATION

Intent to Play/Registration Form

Season: 2023 Challenge Season All players must complete this form prior to the season and pay nomination fee. Players Name: Date of Birth Address: Suburb. Postcode....... Contact No: Email address: Occupation: If under 18 School currently attending: PARENT/GUARDIAN'S NAMES: Guardian 1: Email: Email: Guardian 2: Email: Email: **ALICE SPRINGS BASKETBALL ASSOCIATION TERMS AND CONDITIONS** • I will read and abide by all codes of conducts and policies that are available for download on the ASBA website. I am aware of the penalties associated with breach of code of conduct zero tolerance policy. Iagree to the above terms and conditions applied by the Alice Springs Basketball Association.

Signature...... Date

(Please See Over)



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PERMISSION FOR PUBLICATION OF PLAYER PHOTOGRAPHS:

The Alice Springs Basketball Association will from time to time, place photographs of players in publications and on the club website/social media.
Photographs that are used will not include identifying information such as addresses and contact phone numbers. The club will be very careful with the information it utilizes.
Igive/do not give the Alice Springs Basketball Association permission to use photographs of me/my child on the Club/Association website and Facebook page for promotion of basketball.
Parent/Guardian's signature (if player is under 18 years)

Players signature (if player is 18 years or over)