

Enter all details of all players in the grade that they will play in.

REGISTRATION FEES FOR THE COMING SEASON ARE **\$150.00 PER TEAM**

**Victorian Baptist Basketball Association Inc  
TEAM REGISTRATION FORM – Winter 2012**

<i>PLAYERS NAME</i>	<i>ADDRESS with postcode please</i>	<i>MOBILE PH</i>	<i>EMAIL</i>	<i>DATE OF BIRTH</i>	<i>PLAYERS SIGNATURE</i>
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The team detailed above hereby applies to register with the Victorian Baptist Basketball Association Inc for the season described and each player hereby applies for membership of the Victorian Baptist Basketball Association Inc. A player must sign this form to be registered. A minimum of six players are required for an entry to be recognised and this team is willing to abide by the Association rules.

Signed for and on behalf of the nominated Church.

**CHURCH PASTOR** \_\_\_\_\_

\_\_\_\_\_  
(Name & signature)

Contact number for church Pastor \_\_\_\_\_

**TEAM REPRESENTATIVE** \_\_\_\_\_

Team Email Contact \_\_\_\_\_

**If paying via credit card, complete the box below.**

**Receipt Number:**

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<b>TEAM SECRETARY</b>	
Name:	_____
Phone (H)	_____
Mobile No.	_____
Email contact	_____
Alternate Contact	_____
<b>TEAM COLOURS</b>	
Top	_____
Shorts	_____
<b>(OFFICE USE ONLY)</b>	
Cheque No	_____
Drawn by	_____
<b>CHURCH NAME IN FULL (print):</b>	
_____	
<b>TEAM NAME:</b>	
_____	

<b>Men</b>		<b>Women</b>		
<i>Preferred grade this season</i>				
A	B	C	D	E
<i>Summer 2011/12 grade</i>				
A	B	C	D	E