



# Preseli Storm Basketball Club

www.preselistorm.co.uk

## Club Registration Form

All Players are required to complete this form and indicate where asked if they wish to register with the B.A.W. in order to be eligible to play matches.

Surname	First Name(s)
Postcode	Address
Telephone No.	
Mobile No.	Email
Date of Birth	Country of Birth
Nationality	Gender M / F
Height	Welsh Speaking Yes / No
Do you wish to be registered with the BAW (and therefore eligible to play in League & Tournament Matches (If yes then 2 Passport sized photo's must be supplied & an additional form completed) Yes / No	
Next of Kin	Emergency Contact No.

Data Protection: Any information provided by you will be held by Preseli Storm Basketball Club on its computer records. We will send you electronic communication where appropriate to keep you updated on the club and forthcoming events. If you do not wish to receive email communications please tick here ( )

Please read the statements below, sign and return it to either Kevin or Jackie:

I understand that in order for me to attend training I require to pay subscriptions and that if I do not pay them that I / My Child will be ineligible to attend future training sessions until such time as any outstanding payments are made.....

Signed..... date.....  
(Parent or guardian if under 16 years of age)

If under 16 your parent or guardian is required to sign below:

I .....give permission for ..... to attend training sessions held by Preseli Storm Basketball Club and for them to attend matches with the team. I agree for them to be supervised by Preseli Storm Coaching Staff at these times.

Signed.....date.....

Preseli Storm Basketball Club is covered by Public Liability Insurance. Personal Injury Insurance is the responsibility of the individual and we recommend that appropriate insurance is obtained by the individual.