



Basketball New South Wales
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JUNIOR PLAYER PERMISSION TO TRIAL FORM

(PLEASE PRINT IN BLOCK LETTER)		PLAYER DETAILS		SECTION 1	
Last name:	First:	Birth date: ____ / ____ / ____	Age:	Sex:	
Street Address/ PO BOX:		City:	State:	Postcode:	
Home:	Mobile:	Email:			
<p>I Wish to Apply for Permission To Trial in:</p> <ul style="list-style-type: none"><input type="checkbox"/> Country Premier League<input type="checkbox"/> Eastern Junior League<input type="checkbox"/> Metro Junior League<input type="checkbox"/> Northern Junior League<input type="checkbox"/> Southern Junior League<input type="checkbox"/> Western Junior League <p>I Wish to Apply for Permission To Trial at the following Association/s (Must list all Associations you are trialing for and provide the same copy to all):</p> <p>_____</p> <p>_____</p>					
Applicants Signature:	Date:	Approval of Parent/Guardian:		Date:	

(PLEASE PRINT IN BLOCK WRITING)		ASSOCIATION APPROVAL		SECTION 2	
Last Name:	First name:	Association:			
Certify that Permission To Trial for the above applicant has been approved between the following dates					
Signed:	Position:	Date: ____ / ____ / ____			

IMPORTANT INSTRUCTIONS
1. Permission to Trial applications must be signed and returned to the player within 5 (five) Days of the permission to trial being presented.
2. This is <u>NOT A CLEARANCE</u> and players may not play in any Basketball NSW conducted competitions without a processed clearance.
3. It is recommended that all parties retain a copy of this agreement. This form does not need to be sent to Basketball NSW.

