

# STURT SABRES BASKETBALL CLUB

## District Intent to Play Form for the 2011/12 Season

Players Name ..... Current Team.....

Date of Birth ..... Address.....

Current Singlet number..... Address..... Postcode.....

Fathers Name ..... Occupation .....

Work Phone ..... Home Phone..... Mobile .....

E-mail.....(please print clearly)

Mothers Name ..... Occupation .....

Work Phone ..... Home Phone..... Mobile .....

E-mail..... (Please print clearly)

I wish to be placed in a squad with the Sturt Basketball Club for the 2011/12 season. I agree to abide by the conditions for the Sturt Sabres Basketball Club as set down in the Information Booklet. I understand that positions for the competition in 2011/12 will be offered according to overall evaluation by the Coaches and Junior Program Manager and will include training attendance, effort, attitude as well as performance.

\* The Sturt Sabres Basketball Club are running Saturday domestic teams. I would like to be contacted about entering or participating in a team.

Yes / No

SIGNED.....(PLAYER)

WITNESSED.....(PARENT/GUARDIAN)

Please return the signed form together with a deposit of \$50 (cheque/money order/Credit card) by the **due date of August 21<sup>th</sup>** to the following address

**STURT BASKETBALL CLUB  
PO BOX 163  
DAW PARK SA 5041**

**OR** to the Sturt office

(During office hours only 2-00 - 5-00 pm Tuesday to Friday (not school holidays) at Pasadena Stadium:  
(Office will accept **cash/cards/cheque or money orders**). A receipt will be issued.

<b>CREDIT CARD</b> Please circle	Card Name	Card Number	Use by Date	Verification No. (back of card)	Amount
MasterCard/Visa/Bankcard					

Signed.....Date.....

**PLEASE NOTE: Failure to return the signed intent to play form with the \$50 deposit may result in players not being considered for squads. This deposit will be deducted from summer fees. Deposits are not refundable**