



# TEMPLEOGUE BASKETBALL CLUB MEMBERSHIP APPLICATION 2011/2012

Please print all information in block capitals

We wish to make an application for membership of Templeogue Basketball Club for 2011/2012 season for:

Family Name:.....

Address.....

Email:.....

Second email:.....

## Senior Section

First Name.....Date of Birth.....Phone.....

First Name.....Date of Birth.....Phone.....

(Fees: Division 1 €300; Student €230; Div. 3 & 5 €260; Student €230)

## Junior Section

First Child.....Date of Birth.....(Fee €230)

Second Child.....Date of Birth.....(Fee €180)

Third Child.....Date of Birth.....(Fee €150)

Academy First Child.....Date of Birth.....(Fee €120)

Academy Second Child.....Date of Birth.....(Fee €100)

Fathers Name \_\_\_\_\_ Phone (H) \_\_\_\_\_ Mobile \_\_\_\_\_

Mothers Name \_\_\_\_\_ Phone (H) \_\_\_\_\_ Mobile \_\_\_\_\_

Please give any relevant medical history: \_\_\_\_\_

We regret those children not yet 7 years of age cannot under any circumstances be afforded membership. Please do not request special treatment. (Birth Certificate must be furnished on request)

\*Please note that membership of Templeogue Basketball Club is subject to the completion of this form. Also note that all of the annual subscription must be paid prior to any member partaking in any training session or match organised by Templeogue Basketball Club.

Templeogue Basketball club accepts no responsibility for any loss or damage to personal articles belonging to its members. We also accept no responsibility for any member of this club during training sessions or whilst participating in any matches. In particular we advise all parents that children are strongly advised to wear a gum shield for both training and games. There is no dental insurance within the club and any child suffering a dental injury whilst not wearing a gumshield will be assumed to have his/her parents permission to participate in this manner and the parents will be deemed responsible for any damage suffered and the costs involved in any treatments.

This application form can only be accepted when accompanied by the appropriate annual subscription.

Signed (Parent/Guardian) \_\_\_\_\_

Please print name: \_\_\_\_\_

Completed application forms should be returned to your coach, team manager or any committee member