

I (Your Name) _____

of the (Teams Name) _____

Warrant and declare that I, on behalf of all members have the authority to make this declaration and accordingly on behalf of the team named on this form, declare that we will participate in ALL games programmed for the duration of the season.

I further agree that, on behalf of all the members, we fully indemnify the City of Busselton, the agents and employees of the Geographe Leisure Centre against any and all claims, however arising, which may result from my teams use, participation in or presence within the Geographe Leisure Centre.

Photographs of team members may be taken & used by the Geographe Leisure Centre for promotional purposes.

Note: Having completed this declaration it is your responsibility to ensure that you have a copy of the Centre Bylaws and that all players associated with your team are aware of them.

INSURANCE: The City of Busselton is **not** responsible for player/teams insurance. Player/team insurance is available, covering official matches and training, please contact your local insurance consultant for details.

Please read all information carefully prior to signing this form and initial next to forfeit fee information

FORFEITS Forfeiting a game may incur a fee.

After 12pm on game day: \$130.00

Before 12pm on game day \$65.00

More than 24 hours notice: No charge.

Initial Here - _____

Signature of Captain

Date

Signature of Staff

Date

Social Basketball

Played Tuesday evenings Winter Season 2024
Umpires are provided.

Enjoy the company of your friends, while
gaining the benefits of exercise, in a social
competition played at the GLC.

Teams can consist of:

ALL MALE or

ALL FEMALE PLAYERS.

Minimum Age 15 Yrs

Nominations Open:

Tuesday 5th March 2024

Nominations Close:

Tuesday 16th April 2024 (Or when competi-
tion is full).

Competition starts:

Tuesday 30th April 2024

Day:

Tuesday evenings

Time:

Start 6pm (may vary subject to team num-
bers)

Price:

\$65.00 per team per week.

Nomination Fee:

\$65.00

Payable with Nomination form. (Non-Refundable).



SOCIAL BASKETBALL Tuesday Evenings

Nomination Form



Geographe Leisure Centre
1 Recreation Lane, West Busselton
E: glcmembership@busselton.wa.gov.au
P: 9754 3600

TEAM NOMINATION FORM 2024

1. TEAM CONTACT (Responsible for all communications)

NAME
ADDRESS:
PHONE: (H) (M)
EMAIL:
P/CODE: (W)

2. ALTERNATE TEAM CONTACT

NAME		
ADDRESS:	P/CODE:	
PHONE: (H)	(M)	(W)
EMAIL:		

3. TEAM NAME / GRADE A/B/C

TEAM NAME:		TEAM UNIFORM; (colour of singlet & shorts)
MENS	LADIES	PREVIOUS TEAM HISTORY;

4. PLAYERS LIST

[illegible]

6. NOMINATION BOND (Office use only)

	Amount Paid	Receipt #	Date Rec'	Time Rec'
NOMINATION BOND				

7. FIXTURES (Office use only)

I _____ (team contact) have received fixtures for the team nominated above and understand I am responsible for handing a copy to all team members.

SIGNED:

8. FORFEITS (Office use only)

DATE	DATE	DATE
PAID	PAID	PAID