## BASKETBALL WA – Association sourced coaching course

Association:

What position do you hold wit	thin the association	on, are you a	uthorised to	o make	this request?
Proposed course:	Community	OR	Club		
Proposed date of course:					
Proposed location of course:					
Proposed cost of course (Cor	mmunity is no mo	re than \$40.	Club is no	more th	an \$170):
Will you be requesting to incr	ease the cost of c	ourses run o	out of your	associat	tion?
	Y	ES NO			
	C	ommunity: \$	;		
	C	lub: \$			
Reason:					
Do you have a qualified prese	enter(s) within you	ur associatior	ז?	YES	NO

Name:

Date:

Please outline what registration process you will be using:

Contact person for queries and late registrations	Name:	
	Mobile number:	

When will you be closing registrations prior to each course?

Will you be capping registrations? YES NO Number of participants:

The following information will be required to be obtained from all participants and emailed to BWA the next business day after the course. This information must be in the format requested by BWA (excel spreadsheet preferred)

First and Last Name Gender Date of Birth Postal Address (+ postcode) Email Address Phone Number Association

The minimum age for each of the courses:

Community 15 years of age prior to the course

Club

18 years of age prior to the course

All participants undertaking the Club Course must have undertaken a Community Coaching course no less than 12 months prior.

Exceptions for the pre-requisites and underage participants can only be approved by BWA

## PLEASE READ BELOW

I understand that as an association approved to run coaching courses we must comply with the above requests in regards to accurate information of who undertook the course and how many participants are at each course. I understand that any exceptions to the minimum age and prerequisites can only be approved by Basketball WA. I understand that a \$15 fee per participant for Community Coach courses and \$40 for Club Coach courses is payable to Basketball WA for all participants within each course which will be invoiced to your association once the registration information has been received. I understand that we must comply with the above and any additional guidelines set out by Basketball WA in regards to running courses internally and failure to adhere to the guidelines may result in my associations approval being revoked.

Association use:

Print Name:

Signed:

Basketball WA office use:

Approved by :

Position:

Signed

Notes: