

**Basketball WA**

**APPLICATION FOR REGISTRATION AS AN AFFILIATED ASSOCIATION**

PROPOSED NAME OF ASSOCIATION:

.....

GEOGRAPHIC AREA OF ASSOCIATION:

.....

NAME(S) OF VENUE(S)

.....

DETAILS OF OTHER USERS OF VENUE(S)

.....  
.....

NAMES OF 5 CLOSEST AFFILIATED ASSOCIATIONS AND VENUES:

.....  
.....  
.....  
.....  
.....

PROPOSED COMPETITIONS AND PROGRAMS (OR EXISTING NON-AFFILIATED COMPETITION AND PROGRAMS) INCLUDING NUMBERS OF PLAYERS AND TEAMS, AVAILABILITY OF SUITABLY QUALIFIED REFEREES AND COACHES:

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.....

Basketball WA is committed to the development of basketball for all those wishing to participate in the game, irrespective of age, gender, location, level or ability or other factors. Consequently, affiliated associations, as partners of Basketball WA should understand that the formation of an association is a commitment to promotion of basketball within the relevant community. This involves player development, coach development and referee development.

In the interests of the game, affiliated associations are required also to abide by the Constitution, By-laws and policies of Basketball WA and to agree to make prompt payments of all due fees and prompt returns of all required information.

**STATEMENT BY THREE PROSPECTIVE OFFICE BEARERS**

Having read the above statement and the Constitution and By-Laws of Basketball WA we hereby agree to make the required commitments on behalf of the proposed association. We acknowledge the responsibility to manage the affairs of the affiliated association in accordance with the Constitution, By-Laws and policies of Basketball WA.

1. NAME:.....

ADDRESS:.....

EMAIL:.....

TELEPHONE: HOME:.....MOBILE: .....

PROPOSED COMMITTEE ROLE:.....

SIGNED:.....



# BASKETBALL WA

2. NAME:.....

ADDRESS:.....

EMAIL:.....

TELEPHONE: HOME:..... MOBILE: .....

PROPOSED COMMITTEE ROLE:.....

SIGNED:.....

3. NAME:.....

ADDRESS:.....

EMAIL:.....

TELEPHONE: HOME:..... MOBILE:.....

PROPOSED COMMITTEE ROLE:.....

SIGNED:.....

Please return this form to:

Tony Amoroso  
Association Development Manager  
PO Box 185  
FLOREAT WA 6014  
Telephone: 6272 0703

Or email: [tony.amoroso@basketballwa.asn.au](mailto:tony.amoroso@basketballwa.asn.au)

If you have any queries regarding this form, please do not hesitate in contacting me at the email address and/or telephone number above.