



NBL1 WEST - PLAYER CLEARANCE FORM

SECTION 1 (PLEASE PRINT)		PLAYER DETAILS			
SURNAME: First:		Birth date:	Age (yrs):	Gender (please circle):	
		, ,		M F N/A	
Address:		State:		Postcode:	
Mobile phone no.	Email address				
SECTION 2 I W	lich to Annly for	on NDI 1 Woot CI	ooronoo		
This form is only used for players transferring from an NBL1 West Club to another NBL1 West Club.					
Current Association:					
New Association:					
Players Signature:	Date:	Parent/Guardian Signature (u18): Date:			
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	IMPORTANT.	INCTRUCTIONS			
IMPORTANT INSTRUCTIONS 1. It is the responsibility of the player or new club to lodge this original clearance form to the Basketball WA office.					
2. There will be a minimum seven-day period of accepting/declining all clearances.					
CLEARANCE APPROVAL FROM "CURRENT" ASSOCIATION					
Last Name:	First: Associa		Associatio		
				T	
Certify that the clearance of the above player has been Approved (please circle):			Yes or No		
If declined, please reason:					
Signed: Position Held:				Deter	
Signed:	Position Heid:			Date:	
	III DODTANIT	INCTRUCTIONS		, ,	
IMPORTANT INSTRUCTIONS 1. Clearance applications must be returned to the player by the new Association once BWA has approved.					
2. It is the responsibility of the new association to ensure clearance has been processed before the player participates.					
SECTION 3 TO BE COMPLETED BY THE BWA OFFICE ONLY					
NBL1 West League Manager: Date:					
(Brighton.pass@basketballwa.asn.au)			Jaic.		
Or					
General Manager of Basketball (Adam.bowler@basketballwa.asn.au			Date:		
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