

# 3 on 3 Junior Tournament –Ballarat

**Team Name:**

**Team Uniform Colour:** (teams may wear any uniform as long as they are the same)

**Age Group:** (please circle age group you are entering)

**Male:**                      **Under 15:**    Yes                      **Under 17:**    Yes                      **Under 21:**    Yes

**Female:**                      **Under 15:**    Yes

**Player 1:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Player 2:** \_\_\_\_\_ **DOB:** \_\_\_\_\_


**Player 3:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Player 4:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Please note:** Teams will all play in the Qualifying days on the 6/7 and 10/7. Playoff day is 12/7 and will be for teams that qualify through. All sessions will run between 3pm and 6pm.

Players must all have a current BVC insurance. All current domestic insurances cover from 1/10/17 to 30/9/18.

FIBA 3on3 rules will apply – see website for official rules and regulations [www.ballaratbasketball.com](http://www.ballaratbasketball.com)

Payment Options		BBA
	Please charge my: <input type="radio"/> Visa <input type="radio"/> Mastercard <input type="radio"/> Bankcard Card number: _____ - _____ - _____ - _____ Expiry Date: _____ - _____    Cardholder Name: _____ Signature: _____    Date: ___ / ___ / ___	Cheque/cash remittance  \$.....

Cash Payment also available:

**Office Use:** Received:                      Date: