

Moycullen Basketball Club

Member Registration Form

Senior Teams & Non Players

2018/19 Season



Club Section: _____

Name: _____

Address: _____

Date of Birth: _____

Telephone: _____

E-mail: _____

I hereby agree to be bound by the rules of the club.

Signature: _____

Date: _____

Disclaimer:

Moycullen Basketball Club insurance is a public liability insurance. Players are not covered for personal injury on this insurance. It is recommended that players are adequately covered on their own insurance for personal injury.

Photographs & Video: *I understand and agree that photographs and video footage may be taken on occasion at games or events and that these images may be used or published on the Moycullen Basketball Website <http://www.moycullenbasketball.net/> or in the newspaper promoting Moycullen Basketball Club.*

For Club use only

Member registration fee of € _____ received by:

Club officer: _____ Date: _____

Section: Senior Ladies / Senior Men / Coach / Team Manager / Committee Member