



SECTION 1 – PERSONAL DETAILS & PLAYER REQUEST

I, _____ (Block letters please) of:

Postal Address: _____

City: _____ Postcode: _____

Email: _____

Date of Birth: _____ Nationality: _____

Players or Teams, State/Territory Registration Number: _____

I wish to apply for a clearance:

From: _____ (Australian Club\State)

To: _____ (Club\State\Country)

Applicants Signature: _____ Date: _____

SECTION 2 – CLEARANCE APPROVAL FROM CLUB

I, _____ (Block letters please) of:

_____ (Basketball Association)

certify that the clearance of the above applicant has been approved declined:

If declined then reason: _____

Signed: _____ Dated: _____

Position: _____ (Position held with Association)

SECTION 3 – CLEARANCE APPROVAL FROM STATE/TERRITORY ASSOCIATION

I, _____ (Block letters please) of:

_____ (State/Territory Association)

certify that a domestic clearance for the above applicant has been confirmed: Yes No

Signed: _____ Dated: _____

Position: _____ (Position held)

Instructions:

1. The last clearing body must return a copy of the form to the player.
2. The form should then be sent into Basketball Australia via fax: 02 9469 7201
3. The player must retain the copy and provide a further copy when they seek to register in a new competition for their new club.