



Referee Payment Form

Once completed please return your form to: Service@actreferees.com.au

Referee's Details:

First Name:		
Middle Name:	DOB:	
Surname:		
Address:		
Suburb:	State:	Postcode:
Email Address: (Payment advices sent to this email address)		

Banking Details

Banking Provider:
Name on Account:

BSB No:				-				A/C No:										
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Hobby Declaration

I hereby declare that in relation to any supplies made by me to a payer ACT Basketball Inc. ABN # 11 936 731 929 for the period from 29 August 2014 until advice in writing to the contrary is received by ACT Basketball Inc.

- a supply has been made by me in the course or furtherance of an activity, or a series of activities, done as a private recreational pursuit or hobby.
- the supply made by me is wholly of a private or domestic nature and does not relate to the conduct of an enterprise.

In line with the Income Tax Assessment Act 1936, payments made to me during the above stated period in respect of this supply will not be subject to withholding tax by the payer.

Signed:

(Signature)

(Individual's name)

(date)