



NATIONAL COMPETITIONS LICENCE

Participant Membership Form

I certify that the information given below is correct and that I agree to abide by the Basketball England Rules and Regulations and the Code of Ethics and Conduct. I hereby confirm that I have read and understood the anti-doping regulations and penalties in force for the official competitions of Basketball England and FIBA. I agree to submit to doping control tests and to abide by the respective anti-doping regulations as appropriate. I also agree that Basketball England may forward my personal data to FIBA and/or UK Sport for use in connection with doping control. NB: The providing of false information may result in disciplinary action against players and/or clubs and will also invalidate any insurance cover provided.

I hereby agree with the above SIGNED (If Under 18 a Parent or Guardian must sign) :

I consent to the use of any photographs taken of me during National Competitions for use by Basketball England in any official publications.

I hereby agree with the above SIGNED (If Under 18 a Parent or Guardian must sign):

Do you have any long-term illness or health problems which limits your daily activities? YES NO

If you answered YES to the above please describe the condition

Do you have any long-term disability which limits your daily activities? YES NO

If you answered YES to the above please describe the condition

CLUB NAME

TEAM NAME **DIVISION**

PERSONAL DETAILS

Male Female

Surname:

First Name:

Postal Address:

Postcode:

Telephone:

Email:

Date of Birth (dd/mm/yy):

Country of Birth:

Current Nationality:

Ethnic Origin:

- | | | | | |
|--|--|--------------------------------------|---|--------------------------|
| <input type="checkbox"/> White British | <input type="checkbox"/> White Irish | <input type="checkbox"/> White Other | <input type="checkbox"/> Mixed White & Asian | <input type="checkbox"/> |
| <input type="checkbox"/> Mixed White & Black Caribbean | <input type="checkbox"/> Mixed White & Black African | <input type="checkbox"/> Mixed Other | <input type="checkbox"/> Chinese | <input type="checkbox"/> |
| <input type="checkbox"/> Black Caribbean | <input type="checkbox"/> Black African | <input type="checkbox"/> Black Other | <input type="checkbox"/> Asian Bangladeshi | <input type="checkbox"/> |
| <input type="checkbox"/> Asian Indian | <input type="checkbox"/> Asian Pakistani | <input type="checkbox"/> Asian Other | <input type="checkbox"/> Other (please state) | |

PARTICIPATION TYPE

- Player**
- Player/Coach**
- Coach**
- Team Follower**

COACHES ONLY

- | | YES | NO |
|--|--------------------------|--------------------------|
| Are you a teacher | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you a P.E teacher | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you coach basketball in school | <input type="checkbox"/> | <input type="checkbox"/> |

PREVIOUS TEAMS

Team played for in previous seasons. Please include country and season if outside the UK.

Club:

Country:

Any player who has been registered in any capacity with another International Federation will need international clearance. The club should visit basketballbasketballengland.co.uk and click on the forms and downloads of the National League section, complete and international clearance request form and send to transfers@basketballengland.co.uk

ADDITIONAL BENEFITS

- Senior Top-Up Insurance - £20**
- U18 Top-Up Insurance - £15**

IMPORTANT REMINDERS

Have you provide your club with:
(Tick to confirm)

DIGITAL LICENCE PHOTO

COPY OF ID PROOF
(Passport or Birth Certificate)

COPY OF VISA
(Non-EEA players only)

*Note – if BE confirms that ID has been provided in a previous season, it will not be required again.
EXCEPTIONS:

All senior Non-EEA participants are required to submit a copy of their passport and visa at the beginning of each season.

EU Participants competing in BBL, WBBL, NBL 1 and WNBL 1 are required to submit their passport at the beginning of each season.