

BUCKINGHAMSHIRE BASKETBALL LEAGUE

LEAGUE ENTRY FORM: 2018-2019 SEASON

	-				-	
Club Name:						
Division:	U12 Mixed		U14 Mixed			
	U16 Boys		U18 Boys			
Preferred Club Contact:						
Contact Telephone Number:						
Contact Address:						
County & Post Code:						
Contact E-mail:						
Please return the signed and cor per team entered by: 28 th Sept unless further entries are being i Entry Fees are received, at which the end of the season. Please no	ember 2018. Sh made. This surety n point it will be h	ould we already fee will act as a eld by the league	hold a surety f non-refundable as a surety fe	for last season e deposit for e e and returned	, please do not s ach team until F d, minus any fine	end again ULL Team es accrued, at
Please contact:	Darren I leaguese	Lewis ecretary@bucksk	asketball.org.	uk		
Cheques should be made payable On receipt of your completed Te your clubs team entry fees. FULI your team's immediate removal in order to cover costs, the fee p of area clubs will be £40. Total to be dependent on the numbers of Many thanks for your co-ope	ram Entry Form, si Team Entry Fees from the league. eer team per game eam entry fees will of entries into each	gned <i>League Ru</i> must be receive e for all divisions Il be calculated b n division (limited	es and Surety d by 12 th Oct will be £35.00 ased on the no	ober 2018. Fa for Buckinghar umber of game	ailure to do so w mshire based Clu es to be played a	vill result in
· ·	J				Data	
Club Contact Name:		Signat	ure:		Date:	
OR OFFICE USE ONLY						
Completed signed form and league rules	received on/	_/	Surety Payment	received £	on/	/
intry Invoice £ sent on	'/_		Entry Payment r	received £	on//	

Clubs team entry confirmation sent on _____/____/_____