**A picture containing drawing

Description automatically generatedBUSSELTON AMATEUR BASKETBALL ASSOCIATION   
TEAM NOMINATION FORM***Please return fully completed to your club*

**TEAM NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DIVISION (AGE GROUP):\_\_\_\_\_\_\_\_\_\_ GRADE REQUESTED: \_\_\_\_\_\_\_\_**

|  |  |
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| **TEAM COACH** | **TEAM MANAGER** |
| **NAME:** | **NAME:** |
| **PHONE:** | **PHONE:** |
| **E MAIL:** | **E MAIL:** |
| **WWCC: YES NO EXEMPT** | **WWCC: YES NO EXEMPT** |

*\*Minimum of 7 players are required to nominate a team*

*\*Senior & U21’s teams only must appoint one of its players as Team Captain and Vice-Captain*

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| **CAPTAIN:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VICE-CAPTAIN:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | *Please indicate highest level achieved in* ***previous season****;* ***MAX 9 points per team*** | | | | |
| **FIRST NAME** | **SURNAME** | **DOB** | **EMAIL** | **PHONE** | **PRIOR YEAR CLUB & TEAM NAME** | ***BLAZERS REP***  ***2 points*** | **WABL**  ***4 points*** | **STATE**  ***5 points*** | **NBL1**  ***5 points*** | **TOTAL**  **POINTS** |
|  |  |  |  |  |  |  |  |  |  |  |
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| ***\* Please refer to BABA By-laws section 5 for clarification to Representative Player points.*** | | | | | TOTAL |  |  |  |  |  |