



**WOMEN'S NATIONAL BASKETBALL LEAGUE
2022**

Please fill this form electronically and email this completed form, together with the players headshot in JPEG format and club logo in AI format to tournament@bas.org.sg.

Team Name: _____

3-Letter Code:

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S/N	Family Name / Last Name	Given Name / First Name	Jersey No.	Date of Birth	NRIC / FIN (Last 4 Digits)	Nationality	Height	Weight	Position
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									

Team Manager: _____

Head Coach: _____

Coach: _____

Coach: _____

Team Official: _____

Team Official: _____

The following person(s) will be the contact personnel and shall be included in all relevant communication:

Name: _____

Name: _____

Role: _____

Role: _____

Email: _____

Email: _____

Mobile: _____

Mobile: _____

I, the undersigned, hereby certify that our team will be represented in this competition by the officials and athletes registered in this form. I declare that I have full knowledge and will accept and comply with the provisions set out in this competition's rules & regulations. I acknowledge and indemnify Basketball Association of Singapore and all associated staffs and volunteers from any loss, damage, injury, disability, death or claim arising in connection to this competition.

Signature of Team Manager or
Official Team Representative

Name of Team Manager or
Official Team Representative

Date



3X3 Entry Form

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Signature of Team Manager or
Official Team Representative

Name of Team Manager or
Official Team Representative

Date



Deposit Refund

Please indicate the full name of the payee for the deposit refund. Please note that the payee name has to be according to the name on bank account.

Name of Payee	
Team Name	

Signature of Team Manager or
Official Team Representative

Name of Team Manager or
Official Team Representative

Date