



Expression of Interest

Reg. No.	BSL14
Standby	
Men's	
Women's	

If your team would like to participate in the Basketball Summer League 2014 please complete the details requested below and forward this form to the Tournament Director.

Team Details

Team Name: _____

Conceived & Managed by

Address: _____

(Complete Address of Team Manager or person who will receive all tournament related correspondence)



Contact Name: _____

(Team Manager or person who will receive all tournament related correspondence)

Email: _____ Mobile No: _____

Please Note

Age Criteria: Men's (for those born in or before 1998), Women's (for those born in or before 1999)

Contact Information: Tournament Director: Rohit D'souza, Email Address: info@sportsworkindia.com , Phone: 9004388801

Sr. No.	BSL Reg. no.	Player Name	E-mail	Date of Birth
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Please attach individual player registration form along with this form on time of submission.

FAIR PLAY I certify that the players who have entered as per the details are true. They are sound in health, fit for playing and free from any kind of injury. The organizers are not responsible for any injury to them or damage or loss of their belongings. They will abide by the rules and regulations of the tournament and will follow instruction given to them by the organizers and officials.

Name: _____ Sign & Date: _____ Entry Fee

Venue Partner



Online Partner

