

Declaration

I acknowledge and verify that all information listed in this application form, as part of the Ballajura Community College Basketball Program, is true and can be used by staff/coaches to make judgements on selection into the program.

STUDENT:

Signed: _____

Date: _____

PARENT:

Signed: _____

Date: _____

If your application is successful, you will be required to sign a Code of Conduct document relating to expectations placed on you during your time in the Basketball Program at Ballajura Community College.

All students must agree to the Code of Conduct in order to be accepted into the program.



Contact Us



9262 7777



ballajura.cc@education.wa.edu.au



Illawarra Crescent, South Ballajura



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Ballajura Community College



Basketball Excellence Program

About the program

The Ballajura Basketball Excellence Program is a school-based sporting program that provides all students with the opportunity to develop specific skills, knowledge, and experiences in basketball. Theory sessions, game skills, fitness, coaching and nutrition will be embedded throughout the program.

Students will have the opportunity to develop their skills in a broad range of technical, tactical and physical components throughout competitions, as well as the possibility of interschool tournaments and camps.

Our Program Includes:

- 2 sessions per week (in lieu of mainstream Physical Education)
- Compete in Junior/Senior Interschool Basketball carnivals and tournaments
- Coaching clinics from invited WABL/NBL coaches/players
- Opportunities to coach and referee at primary school events

Successful students who are accepted to join the Ballajura Basketball Excellence Program must maintain academic standards, comply with attendance guidelines, and REACH values.

Player Profile

If you currently play Basketball for a club complete question 1
(if not, proceed to Question 2)

1. Which club and/or representative team/s do you currently play for?

2. Please list your history of sporting representation and achievements (club/school) in extra-curricular activities

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

To register your child's interest, please complete the application form and return to the College by Friday 31 March, 2023.

If you have any queries or questions regarding the application process, please contact Brandon Migro, Program Coordinator.



brandon.migro@education.wa.edu.au



9262 7777

Application

Student Details

Name: _____

Address: _____

Suburb: _____

Post Code: _____

Date of Birth: _____

Current School: _____

Medical History

Have you been diagnosed with any health conditions which may affect your involvement in various forms of exercise? (tick yes or no)

- Yes ☐
- No ☐

If yes, please provide details on the health conditions, including medication/treatment necessary
