

COBURG BASKETBALL ASSOCIATION INC

JUNIOR DOMESTIC CLEARANCE FORM- Summer 2021

DATE.....

To the SecretaryBasketball Club

Name of Player.....

Address.....

Hereby apply for a clearance to –

.....Basketball Club.

Reason(s) for the clearance is (are)

.....

Players Signature.....

THE ABOVE NAMED HAS BEEN GRANTED / NOT GRANTED
A CLEARANCE FROM

.....TO

Signed

Club.....

Position within the club.....

Endorsed by the clearance committee.....

Date.....