



McKinnon Basketball Association Inc.  
11 Clarence Street,  
East Bentleigh, 3165  
Association mailing address:  
P.O. BOX 4003,  
McKinnon, 3204  
Telephone: 03 9579 1200  
Fax: 03 9579 1300  
[www.mckinnonbasketball.org](http://www.mckinnonbasketball.org)

## PLAYER CLEARANCE FORM

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### Procedure for Player Clearance

- Player to complete Section 1 of the clearance in full
- No clearance required if a player has not played for 2 seasons or more
- The original form then needs to be given to the player's club that they wish to be cleared from ( the club they are currently registered with)
- The club has 14 days in which to sign the clearance and return it to the player unless a reason can be given **not to** clear the player
- The original clearance needs to be sent to the MBA office to be processed by 5pm on Monday immediately after Junior Grand Finals ( the season prior to the commencement of the season in which the player will play for the 'new' club)
- We recommend you keep a copy of your clearance.
- Once the clearance has been processed notification will be provided to the player
- It is the responsibility of the new club to ensure the player has been cleared prior to playing them

*"McKinnon Cougars"*



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## PLAYER CLEARANCE FORM

(PLEASE PRINT)		PLAYER DETAILS		SECTION 1	
Last Name:		First Name:		Birth date: / /	Age: Sex: <input type="checkbox"/> M <input type="checkbox"/> F
Street Address:			City:	State:	Post Code:
Mailing Address			City:	State:	Post Code:
Home Phone no.	Mobile Phone no.	Email Address:			
<b>I wish to Apply for a Clearance:</b>					
From Club:					
To Club:					
Player's Signature:		Date	Approval of Parent/Guardian:		Date
IMPORTANT INSTRUCTIONS					
1. It is the responsibility of the player to lodge this original clearance form to the MBA office at the address above.					
2. The player must retain a copy to provide when seeking to register with a new club					
3. This form must be submitted before 5pm on the Monday following Grand Final weekend ( the season before the player commences playing with their new club)					
CLEARANCE APPROVAL FROM CLUB				SECTION 2	
Last Name:		First Name:		Club:	
<b>Certify that the clearance of the above applicant has been</b>				<input type="checkbox"/> Approved	<input type="checkbox"/> Declined
Reason, if declined:					
Signed:		Position held with Club:			Dated:
1. Clearance applications must be signed and returned to the player within 14(fourteen) days of the clearance being presented.					
2. It is the responsibility of the new club to ensure that this clearance has been processed before the player takes the court.					
MBA OFFICE USE ONLY					
Date Received:			Clearance Completed:		
			Date:		
Comments:					

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## PLAYER CLEARANCE FORM

Name:	Signature:
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