PLEASE EMAIL RESPONSE TO SHEENA ATKIN – sheena.atkin@basketballvictoria.com.au

**EXPRESSION OF INTEREST TO PARTICPATE IN WALKING BASKETBALL**

* Individuals complete Section 1
* Groups complete Sections 1 and 2

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| **SECTION 1: YOUR DETAILS** | | | |
| **1** | Name |  | |
| **2** | Email |  | |
| **3** | Phone |  | |
| **4** | Postcode |  | |
| **5** | Gender |  | |
| **6** | Age |  | |
| **SECTION 2: ABOUT YOU GROUP (if applicable)** | | | |
| **7** | Tell us about your group?   * Number of people * Gender * Age range * Basketball experience * Area | |  |

WHATS NEXT?

After submitting this form Basketball Victoria will contact you regarding the next steps to getting involved in Walking Basketball