

SRI LANKA BASKETBALL LEAGUE 2019 PLAYER REGISTRATION FORM (Men) (PLEASE FILL IN BLOCK CAPITALS / *MANDATORY FIELDS)



Full Name*			
(Underline preferred			
name on jersey)			
Date of Birth*			
(DD/MM/YYYY)			
National ID			
No./Passport NO			
			Affix Recently Taken Passport
Height* (Feet/Inches)			Size Photograph on white
			background
Weight* (Kg)			
Playing Position/s*			
Registered	Close Association	s: Mercantile SL Navy SL Army SL A	ir Force SL Police SL Schools
Association*	SL Universities		
(Please Underline)			
	Open Associations: Colombo DBA Gampaha DBA Kalutara DBA Kandy DBA		
	Matale DBA Nuwara Eliya DBA Kurunegala DBA Puttalam DBA Badulla DBA		
	Rathnapura DBA Kegalle DBA Moneragala DBA Galle DBA Matara DBA Hambantota DBA Jaffna DBA Vauniya DBA Mannar DBA Mulativ DBA Kilinochchi		
	DBA Batticaloa DBA Ampara DBA Trincomalee DBA Anuradhapura DBA		
	Polonnaruwa DBA		
Playing Club/			
Organization/			
University/ School*			
Minimum Eligibility	(a) 51 st Senior Nationals		
Criteria: Underline	(b) 52 nd Senior Nationals		
the recently	(c) Mercantile League A Division 2017/2018		
participated	(d) Colombo Super League A Division 2017/2018		
tournament/s*	(e) Other (Attach recommendation letter from the Club/ Organization, University,		
	School, verified by registered association		
Contact Details*	Mobile No.		
	Email		
	Residential		
	Address		
Declaration*	I certify that, to the	best of my knowledge and belief, the inform	nation provided here are true and
	correct. I undertake to inform you of any changes therein, immediately. In case any of the above		
	information is found to be false or untrue or misleading or misrepresenting, I am aware that I may		
	be held liable for it. I agree to abide by tournament, SLBF and FIBA Rules and I hereby authorize sharing of the information furnished on this to SLBF contracted 3 rd parties.		
Signature *	Sharing of the injuri	nation jurnished on this to SEDI Controcted.	o partico.
Date*			