



REGISTRATION FORM BASKETBALL VERENIGING AALSMEER

(Please fill in the fields in block letters)

1: Personal Information

Name: _____

Date of Birth: ____ / ____ / ____

Gender: Male Female Other

Address: _____

Postal Code: _____ City: _____

Phone Number: _____

Email Address: _____

Recent
Photo

2: Parent/Caregiver (if under 18 years old)

Parent/Caregiver 1: _____

Phone Number: _____

Email Address: _____

Parent/Caregiver 2: _____

Phone Number: _____

Email Address: _____

3: Sports Information

Have you played basketball before? Yes No

If yes, at which club? _____

Playing experience: Beginner Advanced Competitive player

Were you a member of another basketball club in the past 5 years? Yes No

If yes, you are required to submit a debt clearance statement from your previous club to BV Aalsmeer.

4: Reduced circumstances (if applicable)

Is your fee paid by the youth sports fund? Yes No

Note: You must submit an application to the municipality every year!

(Reduced circumstances for children from low-income families.)

If yes, skip step 5 and proceed to step 6.

5: Contribution and Payment

I agree to the membership fees of Basketball Club Aalsmeer as stated on the website.

Bank Account Number (IBAN format): NL_____

Account Holder's Name: _____

6: Signature

I declare that the information provided is correct and that I agree to the terms and conditions of the club.

By filling in the bank details, I authorize BV Aalsmeer to collect membership fees and any fines via direct debit.

Signature of member (if 18+): _____

Signature of parent/caregiver (if under 18): _____

Date: ____ / ____ / ____

7: GDPR Consent

BV Aalsmeer Privacy Policy: The personal data provided will only be used for administrative and sports-related purposes.

I give consent for:

- Listing my name and phone number for member contact Yes No
- Including my (team) photo in the club directory Yes No
- Publishing action and/or team photos without name mention in the newsletter, website, or social media Yes No
- Publishing action and/or team photos with name mention in the newsletter, website, or social media Yes No
- Mentioning my name in match reports Yes No
- Contacting me for sports activities from third parties Yes No

I understand that I can withdraw or adjust my consent at any time.

Name: _____

Date: ____ / ____ / ____

Signature of member (if 18+): _____

Signature of parent/caregiver (if under 18): _____

Submission Instructions

Submit the completed registration form along with a recent passport photo to the trainer or send it via email to ledenadmin@bvaalsmeer.nl.

We warmly welcome you to Basketball Club Aalsmeer!