# REPRESENTATIVE PLAYER AGREEMENT



# I PROMISE THAT I WILL...

### PRACTICE TIME

- Display the highest level of good sportsmanship at all times.
- · Attend all practices, and be punctual.
- Will notify the Manager if am unwell/injured, and/or under treatment for any medical condition.
- Not swear.
- · Control my temper.
- Support and encourage my teammates.
- · Practice to the best of my ability.
- Show the utmost respect for the team and management.

## **TOURNAMENT TIME**

- Not partake of alcohol or non-prescription drugs and have nothing to do with cigarettes while under my coaches or managers care.
- · Display the highest level of good sportsmanship at all times.
- · Abide by all curfews set by Team Manager.
- Bring any personal problems to the attention of the Manager.
- Will notify the Manager if am unwell/injured, and/or under treatment for any medical condition.
- Not swear, as I am a representative of Tauranga City Basketball and my team.
- Stay with the team or within the teams designated area and not leave the venue unless I have permission from my Coach or Manager.
- To keep control of my temper while playing and when with the team.
- Play the game by the rules and not dispute referees decisions.
- Support and encourage other Tauranga City Basketball representatives, especially my teammates, and especially when I am on the bench.
- Keep accommodation and ground transport in a neat, tidy and clean condition.
- Not play a part in vandalism of any type. I realize that should it occur, then I would have to pay repair/replacement costs.
- Follow all directives issued by the Manager and Coach without question (covering such areas as, standard of dress, meal times, rest times, cleaning of accommodation and transport).
- Play to the best of my ability.
- Show the utmost respect for the team and management.
- It is understood that failure to adhere to any of the above may see me being dismissed from the team and returned to their place of residence at my own cost.

### **FINANCE**

Will (Guardian of) contribute all costs as determined by Tauranga City Basketball for that particular age group
or team (not withstanding any fundraising that may relate to the age group or team).

PLAYERS NAME:	PLAYERS SIGNATURE:
PARENT / GUARDIAN NAME:	PARENTS/GUARDIAN SIGNATURE:
DATE:	