



National Coaching Certification Program Registration Form

LOCATION: \_\_\_\_\_ DATE: \_\_\_\_\_

CC#	Last name	First name	Address	City	Province	Postal/Zip	Phone #	Birthdate dd/mm/yy	Gender	E-mail	Club/Association	Member Y/N	Amount Paid

**Instructions:**

- Please complete above registration form, including location and date you wish to attend, and forward to Faye Richard at [bnsadmin@basketball.ns.ca](mailto:bnsadmin@basketball.ns.ca) or fax to 902-425-5606
- Payment by cheque or money order made out to Basketball Nova Scotia can be sent to Faye Richard at Basketball NS, 5516 Spring Garden Rd, Halifax., NS B3J 1G6
- Payment of cheque or money order can be made at the above BNS office from 9-5pm. Cash payments - call first to ensure a BNS rep is available to receive as reception cannot accept cash.

**Please note:** If you have not taken an NCCP clinic before you will not have a CC# (Certification Number) so ignore this column.