

Basketball Academy Application Form

Academy Application Form may be emailed to **academy@coolumshs.eq.edu.au** or delivered to the Administration Office, Coolum State High School, Havana Road East, Coolum Beach **by 3.00pm Monday 9 February 2026.**

	First Name	Surname	
Student Details	Gender (please tick)	Date of Birth	2025 Year Level
	☐ Male ☐ Female		
	First Name	Surname	
Parent / Carer Details	Mobile No.		
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	Email Address		

Academy Information

When: The Basketball Academy runs from Term 1 to Term 4 2026. Students compete in the Sunshine Coast Secondary Schools Basketball competition, Champion Basketball School of Queensland (CBSQ) competition and additional qualifying competitions with days and times to be confirmed.

Training occurs once a week outside of school hours with day and time to be determined.

Where: Competition venues vary throughout the year. Transport to the venue may need to be organised by the student.

Training occurs in the Coolum State High School Hall.

Who: The Basketball Academy is coordinated by Coolum State High School staff and qualified coaches dedicated to our students' success and progression in the game of basketball. Students of all year levels are eligible for entry into the Basketball Academy.

Cost: \$160 – inclusive of external sports and conditioning coaching, training equipment, competition entry, uniform.

- Please note the viability of each Academy is dependent upon sufficient student interest.
- Prices listed above are based on current Academy enrolments. Final pricings will be determined and communicated when selection has been finalised for each Academy and may not include all competition fees.

Academy Trials

Please note that there are a number of teams selected for the Basketball Academy: Boys: Juniors, Intermediate and Seniors. Girls: Juniors, Intermediate and Seniors. Selections will be made in consideration of the following written application and students' participation in the Basketball Academy Trials in **Term 1 2026.** Students submitting this form will receive an invitation to trial once a specific date has been selected.

Payment of Academy Program/s Fees

If your child is a successful applicant, all outstanding school fees must be paid in full or an up to date payment plan in place, approved by the Business Manager. In addition, Academy fees must be paid in full 30 days after the invoice has been issued.

Please note that the costing of each Academy is determined by the number of successful applicants each year. For this reason, refunds cannot be granted for students leaving the program after its commencement.

I was a member of the 2025 Basketball Academy Program (please tick):		
	 ☐ Yes – You do not need to complete the Questions below. However, please sign where indicated. ☐ No – You must complete the Questions below and sign where indicated. 	
Ple	ase complete the following application questions:	
1.	Current coaching and training (specify hours of training per week, who with etc)	
2.	Have you played in a Basketball competition previously? What was your highest level of success?	
3.	What is your chosen position on the court?	
4.	What drives your passion for Basketball? Who is your favourite player and why?	
5.	What is the biggest goal you want to achieve as a basketballer and how could you accomplish it?	

Basketball Academy Application Checklist

I have completed all required sections of the Application Form.
I have included an outline of any training in my chosen sport/s as well as any certificates, awards and results.
I understand as part of my application I will be available to attend the Coolum State High School Basketball Academy trials in Term 1 2026 , when the date has been determined.
I understand that it is a requirement of the Academy Program that I have, and will continue to display, appropriate behaviour and attitude across all areas of learning and am aware that should my behaviour be less than exemplary, I may be at risk of losing my Academy position.
I understand the decision with regard to the awarding of entry into an Academy Program, including ongoing participation in the Program, will be at the discretion of the Principal.
I understand for the student's place in the Academy Program to be confirmed, all outstanding school fees must be paid in full or an up to date payment plan in place, approved by the Business Manager. In addition, Academy Program Fees must be paid in full 30 days after the invoice has been issued.
I understand that the costing of each Academy is determined by the number of successful applicants each year. For this reason, refunds cannot be granted for students leaving the program after its commencement.
Should I be selected and offered a position within the Academy Program, I understand that all required trial / training / competition consent forms will be returned by the due date nominated on the relevant form, along with the signed Academy Acceptance Form, confirming I accept the position, agree to the fees payable and the student code of conduct. If I do not return these forms by the required date, I may be at risk of losing the Academy positioned being offered to me.



By signing this application form, I give consent for my child to trial for the Basketball Academy and attend training sessions as outlined by the Academy Coordinator in future correspondence.

Activity Risks and Insurance

Please note that the Department of Education and Training does not have personal accident insurance cover for students. If your child is injured as a result of an accident or incident while participating in the activity, all costs associated with the injury, including medical costs, are the responsibility of the parent/carer. Some incidental medical costs may be covered by Medicare. If you have private health insurance, some costs may be also covered by your provider. Any other costs must be covered by parents/carers. It is up to all parents/carers to decide what types and what level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow your child to participate in this activity.

Consent

By signing below, I agree that:

• I have read all of the information contained in this document in relation to the activity (including any attached material) and I am aware that the Department of Education and Training does not have personal accident insurance cover for students.

I give consent for my child	
Home Group (if applicable)	, to participate in the 2026 Basketball Academy
Trials on dates to be confirmed and communicated	by the Academy Coordinator.

- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment my child may reasonably require, including contacting my child's doctor.
- I accept liability for all reasonable costs incurred by the Department of Education and Training in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the Department of Education and Training the full amount of those costs.
- I have provided the school all relevant details of my child's medical or physical needs on enrolment and where relevant have updated this information.

Basketball Academy Application Declaration

Date
Date