



APPLICATION FORM

(November 2026 - June 2027)

JUNIOR COACH APPLICATION FORM

PERSONAL INFO

MALE ☐ FEMALE ☐

NAME: _____ SURNAME: _____

DATE OF BIRTH: ____/____/____ AMKA / SSN: _____
MM DD YY

E-MAIL: _____ PHONE NUMBER: _____

NATIONALITY: _____

LANGUAGE(S): GREEK ☐ ENGLISH ☐ FRENCH ☐ UKRAINIAN ☐
FARSI ☐ ARABIC ☐

HOME ADDRESS: _____ POSTAL CODE: _____

BASKETBALL EXPERIENCE:

PLAYER ☐ COACH ☐

CV MUST BE SUBMITTED

T-SHIRT SIZE S ☐ M ☐ L ☐ XL ☐ SHOE SIZE (EU) ☐

FAMILY AND INCOME STATUS

If the applicant meets ONE or MORE of the criteria listed below, please check the relevant box. Check all that apply to your circumstances – this will help lead to an invitation to the Antetokounmpo Academy.

For each of the criteria checked, the applicant will be asked to submit a print copy of the relevant official document certifying its status. In case the documents required are not valid or are non-official or are not submitted until the October 26th, 2026, the submission will be marked as incomplete and won't be considered for evaluation.

ANNUAL INCOME (2025):

FOR SINGLE (UNMARRIED) APPLICANTS: €0 – €1,500 ☐ €1,501 – €3,000 ☐ €3,001 – €5,000 ☐

FOR MARRIED* APPLICANTS: €0 – €2,700 ☐ €2,701 – €4,000 ☐ €4,001 – €6,000 ☐

* Annual family income

Number of children: 1-2 children ☐ 3+ children ☐

Single parent family ☐

Unemployed: Applicant ☐ Applicant's spouse ☐

Has children and/or spouse with a degree of disability over 67% ☐

Required documents: income tax declaration (2025), family status certificate, valid unemployment card, disability certification (KEPA)

AGREEMENT AND CONSENT PROVISION

By submitting this Antetokounmpo Academy application form, you automatically acknowledge and agree to the Program Terms and Conditions.

HEALTH STATUS

The applicant acknowledges that he/she is not experiencing any health concerns or injuries that will be aggravated by participating in the Antetokounmpo Academy's training program.

AUDIO, VIDEO & PHOTO SHOOTING CONSENT

As part of our Program recording, we will be video and photo shooting the Program's activities and the participating coaches for archival, promotional and media use, and by submitting this application form, you give your consent.

TRANSPORTATION

Participants' transfer to the court and back, and to Basket League game visits, will be made using their own means of transport. For the participation to the educational workshops, transportation to the workshop location and back will be provided by Antetokounmpo Academy, with the meeting point being the training courts.

PLEASE PROVIDE A BRIEF EXPLANATION OF WHY YOU WISH TO JOIN THE ANTETOKOUNMPO ACADEMY

APPLICANT

FULL NAME _____ DATE: _____

I agree to the terms and conditions ☐

SIGNATURE