

**NOMINATION  
FORM**

**PH: 9816-5844  
FAX: 9817-1391**

**ACTION INDOOR SPORTS  
GLADESVILLE  
MONDAY NIGHT NETBALL COMPETITION**

**TEAM NAME:** \_\_\_\_\_

**TEAM CAPTAIN:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE: (H)** \_\_\_\_\_

**(W)** \_\_\_\_\_

**(Mobile)** \_\_\_\_\_

**\* GAME FEES: \$59.40 PER GAME/PER TEAM**

**\* REGISTRATION FEE: \$16.50 PER PLAYER**

**\* 6 – A –SIDE**

**(CAN U PLAY 5.45PM) YES/NO**

**APROX DIVISION** \_\_\_\_\_

**(CAN U PLAY 6.30PM) YES/NO**

I DO HEREBY AGREE ON BEHALF OF MYSELF AND MY TEAM MEMBERS TO ACCEPT AND PLAY BY THE RULES AND TO CONDUCT OURSELVES AS FAIR AND DECENT SPORTS FOR THE DURATION OF THE NETBALL SEASON. WE ALSO AGREE TO PAY \$90.00 FORFEIT FINE SHOULD OUR TEAM FAIL TO ARRIVE FOR ANY SCHEDULED GAME.

Captain signature: \_\_\_\_\_

Dated: \_\_\_\_\_