



TEAM NOMINATION FORM
CAIRNS NETBALL FOWLERS GROUP
JUNIOR CARNIVAL
SUNDAY 13TH AUGUST 2017



Team: _____

Team Contact: _____

Phone: _____

Email: _____

Coach: _____ Blue Card No.: _____ Blue Card Expiry: _____

NOMINATED UMPIRE: _____ QUAL: _____

Carnival divisions: Please circle relevant one.				
Junior:	Netta	10/U	11/U	12/U

	NAME	D.O.B.	Office Use Only
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

***Must have 6 teams to make a division, money will be refunded if insufficient teams nominate.
 Open to all club, social and school teams!***

Games will commence: TO BE CONFIRMED ONCE DRAW IS COMPLETE.

CLOSING DATE: 4TH AUGUST 2017 FORM & FEE TO Cairns Netball Association: admin@cairnsnetball.net.au

TEAM NOMINATION FEE:

- \$80.00. Proof of bank deposit must be attached to nomination form/s.

ANZ - BSB 014577 Acct No 296844746 Cairns Netball Association Inc

NOMINATIONS CLOSE 5PM 4TH AUGUST 2017

Office use only: AMT PAID: \$ _____ REC. NO: _____ DATE: ____/____/____



Martyn Street Reserve, PO Box 430N, North Cairns Qld 4870, Phone: 0740 517 501

Email: info@cairnsnetball.net.au Web: www.cairnsnetball.net.au

ABN: 64 626 334 864