



SPORTS TEAM NOMINATION FORM

CONTACT INFORMATION

Team Representative Name: _____
Home Phone: _____ Mobile Phone: _____
Address: _____ Suburb: _____ Postcode: _____
Email Address: _____
Team Name: _____

SPORT NOMINATED

Beach Volleyball	Men's	Ladies	Mixed	Junior	Senior
Netball	Men's	Ladies	Mixed	Junior	Senior
Basketball	Men's	Ladies	Mixed	Junior	Senior
Floorball	Men's	Ladies	Mixed	Junior	Senior
Other: _____					

Day(s) of the Week: _____ Morning / Evening (from 6.30pm)

TEAM HISTORY

HAVE YOU, YOUR PLAYERS OR TEAM PLAYED AT SJCRC YMCA BEFORE? YES / NO

IF SO, IN WHICH TEAM: _____

HOW DID YOU HEAR ABOUT US?

FRIEND BROCHURE NEWSPAPER WEBSITE CENTRE

NOTE: THIS FORM MUST BE FILLED OUT IN ITS ENTIRETY AND NOMINATION FEE PAID BEFORE TEAM IS NOMINATED.

ALL NOMINATIONS ARE AT THE DISCRETION OF THE SPORTS MANAGER.



