SUMMER 2010-2011

EAST HILLS JUNIOR OZTAG TEAM REGISTRATION FORM

TEAM NAME:	GRADE (Please Cirle)						DIVISION (Please Cirle)		
	U6	U8	U10	U12	U14	U16	Boys	Girls	Mixed

TEAM DELEGATE:	**PHONE NO:**
DELEGATES ADDRESS:	**MOBILE NO:**
E-MAIL:	

TEAM DETAILS

OFFICE	SHIRT NO.	FULL NAME:	REGO NO.	ADDRESS	CONTACT NO.	D.O.B	SIGNATURE

Indemnity *: We the above signed hereby declare & agree that we are participating in the OZTAG Competition of our own free will & entirely at our own risk. We agree to abide by all rules as determined by the organisers.*

Signature: *All players have signed this registration form confirming that they have read and understood the Insurance Cover for Players on the reverse of this sheet as well as Conditions of Play. Any player that has not signed or paid their Registration Fee understands that they are not a Registered player and can not claim Insurance.*