WEST RURAL ST.ANDREW INTER-DIVISIONAL NETBALL TOURNAMENT

Event Registration Form





Thank you for participating and Good Luck!				
Division (tick one): La		randon Hill		
Once you have completed this form please email to westruralpnp@gmail.com				
Team Information (continued on the back)				
Full Name		Phone Number	Date of Birth	
Additional Information				
Do any team members have pre-existing health conditions?	[] No [] Yes (Please specify):			
Team manager or other emergency contact:	Name:	Phone:		



AS A PARTICIPANT YOU AGREE TO RECEIVING INFORMATION ABOUT FUTURE ACTIVITIES





Team Information (continue listing team members)

Full Name	Phone Number	Date of Birth

AS A PARTICIPANT YOU AGREE TO RECEIVING INFORMATION ABOUT FUTURE ACTIVITIES

THANK YOU FOR PARTICIPATING & GOOD LUCK!