



SOCIAL SPORTS 2010

SEMESTER 1

REGISTRATION DEADLINE: 3 MAR 2010

PAYMENT METHOD
PLEASE SELECT

- UPFRONT
 WEEKLY

SPORT: _____ TEAM NAME: _____

TEAM CAPTAIN: _____ TEAM COLOUR(S): _____

	FIRST NAME	SURNAME	CONTACT NO.	EMAIL	SIGNATURE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

1. Areas highlighted must be completed. An incomplete entry form may not be accepted.
2. Email addresses must be entered CLEARLY so team members can be contacted regarding match changes. It will be the responsibility of the team captain to ensure that all team members receive updates.
3. By signing this form, each player represents that they have read and understood the terms and conditions.

