



**TEAM NOMINATION FORM**

**MLEAGUE COMPETITION**

**SEASON: Winter / Summer**

**DIVISION: Mixed / Mens**

**TEAM NAME:** \_\_\_\_\_

**PREFERRED GRADE: A B C D UNSURE**

Management reserves the right to regrade the team if deemed appropriate

<b>UNIFORM</b>	<b>TOPS</b>		<b>BIBS</b>	
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**Does your team need to hire bibs for the season: YES / NO**

**PRIMARY TEAM CONTACT:**

**Name:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Best Contact #:** \_\_\_\_\_

**SECONDARY TEAM CONTACT:**

**Name:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Best Contact #:** \_\_\_\_\_

**PLEASE SIGN AS TEAM REPRESENTATIVES:**

We accept responsibility for any outstanding fees incurred by the team registered within this nomination form and understand that our team is bound by the rules and policies of SA Men’s Netball Association Inc. You acknowledge that you have read the TERMS AND CONDITIONS of entry and signify your acceptance of these terms and conditions, outlined in this document, by signing the nomination form.

**SIGNED:** \_\_\_\_\_