



# **REGISTRATION FORM**

**TEAM NAME:**

**TEAM CAPTAIN NAME:**

**Captains Are Responsible For Collecting  
& Depositing Teams Funds.**

**POSTAL ADDRESS:**

**CONTACT NUMBER:**

**EMAIL:**

**PLAYER 2 NAME:**

**PLAYER 3 NAME:**

**PLAYER 4 NAME:**

**HOW MANY PEOPLE FOR PRESENTATION DINNER:**

**ADULTS:**

**CHILDREN:**

**Once Applications Have Been Received An Invoice Will Be Sent With Total Amount Due To**

**The Team Captains Email Address, Payment Is Due No Later Than 20th Of April**

**PLEASE USE YOUR TEAM NAME AS A REFERENCE WHEN MAKING PAYMENT**