



# Group Nomination

## Winter 2011 Season

Season starts 3<sup>rd</sup> May 2011

Team Name			
Team Name:		Grade	
Number of Players:			

Team Manager contact details			
Name		DOB	
Address + Suburb		P/Code	
Home Phone			
Work Phone			
Mobile			
Email address (essential)			

Team Manager Deputy contact details			
Name		DOB	
Address + Suburb		P/Code	
Home Phone			
Work Phone			
Mobile			
Email address (essential)			

### Location & Night Preferences

Please indicate if the ground or night preferences are more important to your team

Night

Venue



Please return forms to:  
PO Box 8293 Woolloongabba 4102  
Email: [office@citytouch.com.au](mailto:office@citytouch.com.au)  
Fax: 3373 8077



**Division**Men's Mixed Women's **Competition Selection***Please tick box.*

Venue	Mon	Tues	Wed
Ashgrove	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chelmer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Colmslie	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enoggera	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grange	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mt Gravatt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Newmarket/McCook Park/Lutwyche	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stafford	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wynnum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Zillmere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*The Individual fee of \$105 must be paid to be placed into a team for the Winter 2011 Competition.***Statement**

I hereby nominate my team in the City Touch Winter 2011 season. My team agrees to abide by the Laws of the Game, Regulations and Codes of Conduct of City Touch as outlined on the website. By signing this agreement, I am entering into a binding agreement for the length of the entire season and agree to be solely responsible for all team fees, being aware of the \$70 late fee if my team is not fully financial by Round 4 of the competition.

Signed:.....Full name:.....Date:.....



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