



SOUTHPORT CARRARA NETBALL ASSOCIATION INC.  
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# TEAM NOMINATION FORM 2017

Date:			
Club:			
Team Name:			
Nominated Division:			
Team Colours:	Skirt		Top

## COMPETITION (Please tick appropriate box)

<input type="checkbox"/> Monday – Benowa Road	<input type="checkbox"/> Open Womens
	<input type="checkbox"/> Intermediate (13-16 years)
	<input type="checkbox"/> Mixed
<input type="checkbox"/> Tuesday – Emmanuel College	<input type="checkbox"/> Elite Division (15 min ¼)
<input type="checkbox"/> Thursday – Carrara/Emmanuel/ Benowa Road	
<input type="checkbox"/> Saturday – Juniors Benowa Rd	

*Please complete all contact details below clearly. Email is used for communication purposes and therefore if you have an email address, please supply this.*

Contact 1	Name:			
	Email:			
	Address:			
Phone:		Mobile:		

Contact 2	Name:			
	Email:			
	Address:			
Phone:		Mobile:		

**Please forward to: Office Administrator PO Box 4060, Ashmore 4214**  
**Office Hours: Monday to Friday 10.00am – 2.00pm Phone: 5539 5195 Fax: 5539 5904**