

RECEIPT NO.:	DATE:
BIRTH CERTIFIC	CATE SIGHTED:

TO BE LODGED WITH THE REGISTRATION FORM

THIS FORM IS REQUIRED F	FOR REGISTRATIONS LOD	OGED AFTER THE LATE RE	GISTRATIONS NIGHT		
NETSETGO SL	JB JUNIOR .	JUNIOR	INTERMEDIATE		
CADET 21:	s SENIOR	PWD	NON-PLAYER		
NAME OF TEAM:			GRADE:		
PLAYER'S NAME:					
ADDRESS:					
			POSTCODE:		
DATE OF BIRTH:		PHONE NUMBER:			
SIGNATURE:		DATE:			
IF YOU HAVE PLAYED IN THE LAST 5 YEARS PLEASE COMPLETE THE SECTION BELOW					
NAME OF DISTRICT & CLUB & T	ΓΕΑΜ LAST PLAYED:				
AGE/GRADE LAST PLAYED:			YEAR:		
NEWCASTLE NETBALL		RECEIPT NO.:			
ASSOC	BIRTH CERTIFICATE SIGHTED:				
TO BE LODGED WITH THE REGISTRATION FORM					
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AGE/GRADE LAST PLAYED:			YEAR:		

NOTE: Incorrect or misleading information may lead to a fine and forfeiting of all registration fees previously paid!