



Tennis Wollongong Competition Team Nomination Form

SATURDAY AFTERNOON MIXED ADULTS 3 x 2 - 2010 Competition 2

Club/Team No:- _____ Home Court:- _____ Surface:- _____ Sugg Div:- _____

Team Captain:- _____ Phone Number:- _____ Email:- _____

Second Contact:- _____ Phone Number:- _____ Email:- _____

Nomination Closing Date:- **8 Dec 2010**
 Competition Commences:- **29 Jan 2011**
 Team Fee:- **\$57.00**

Office Use Only

Team Fee Paid:- _____

Note:- ALL DETAILS REQUIRED FOR NEW PLAYERS AND CHANGES ONLY FOR EXISTING PLAYERS. Date of birth required for all players.

ESTIMATE HANDICAP FOR NEW PLAYERS - Compare with present players [see TW rule 12]

#	M F	Surname	First Name	Address	Post Code	Email	Phone	Date of Birth	H'cap	Registered Club	Last Comp year/club/div	Registered Association
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												

Comments:- _____