



Barossa Aquatic & Fitness Centre
 Magnolia Road, TANUNDA SA 5352
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TEAM NOMINATION FORM

LADIES COMPETITIVE ()
 LADIES SOCIAL ()
 MIXED SOCIAL ()
 JUNIOR SOCIAL ()

Preferred Day and Time

TEAM NAME: _____

TEAM CONTACT: _____

PHONE: _____ **EMAL:** _____

ADDRESS: _____

_____ P/Code _____

UNIFORM COLOUR: (Top colour to be consistent not different shades of the same colour)

SKIRT / SHORTS : _____ **TOP :** _____

SURNAME	CHRISTIAN NAME	PHONE	DOB	CURRENT GRADE / COMP

I, the team contact have read a copy of the centres by-laws and policies on behalf of my team and we agree to abide by them. I understand I am the liaison person between the centre and my team and receive any mail outs and verbal communication from the centre

Signed _____ Print _____ Date _____

