

SENIOR DIVISIONS

TOUCH SPORTS CARNIVAL

FESTIVAL DATES:
25-27 Nov 11

MINIMUM PRIZE MONEY BREAK UP – FOUR DIVISIONS			
MENS (OPEN)	MENS (OPEN) PLATE	MIXED (OPEN)	MIXED (OPEN) PLATE
1ST \$6,000.00	1ST \$1,100.00	1ST \$6,000.00	1ST \$1,100.00
2ND \$2,000.00	2ND \$700.00	2ND \$2,000.00	2ND \$700.00



NOMINATION FEE: MENS OPEN: \$770 per team (all GST included)
MIXED OPEN: \$770 per team (all GST included)
14 Players per team

REGISTRATION FORM

Team's Name: _____ Contact Person's Name: _____
Phone Number: _____ Fax Number: _____
Postal Address: _____

All teams must supply a qualified referee for the competition: Name of Referee: _____

Badge No. _____ Level _____ Club Assoc. Affiliation _____

Please nominate the appropriate competition with a tick:

MENS (OPEN) **MIXED (OPEN)**

Name	Date of Birth	Signature	Rep Player <small>(inc. State/Nat/NZ)</small>
1. _____	___ / ___ / ___	_____	<input type="checkbox"/>
2. _____	___ / ___ / ___	_____	<input type="checkbox"/>
3. _____	___ / ___ / ___	_____	<input type="checkbox"/>
4. _____	___ / ___ / ___	_____	<input type="checkbox"/>
5. _____	___ / ___ / ___	_____	<input type="checkbox"/>
6. _____	___ / ___ / ___	_____	<input type="checkbox"/>
7. _____	___ / ___ / ___	_____	<input type="checkbox"/>
8. _____	___ / ___ / ___	_____	<input type="checkbox"/>
9. _____	___ / ___ / ___	_____	<input type="checkbox"/>
10. _____	___ / ___ / ___	_____	<input type="checkbox"/>
11. _____	___ / ___ / ___	_____	<input type="checkbox"/>
12. _____	___ / ___ / ___	_____	<input type="checkbox"/>
13. _____	___ / ___ / ___	_____	<input type="checkbox"/>
14. _____	___ / ___ / ___	_____	<input type="checkbox"/>

Coach's Name: _____ Manager's Name: _____

14 PLAYERS PER TEAM. PLEASE IDENTIFY REP PLAYERS AND READ THE ELIGIBILITY FORM ATTACHED.



NOMINATION CUT-OFF & CLOSING DATE FRIDAY 4th NOVEMBER
All players competing over the weekend will be covered by sports coverage insurance.
All payments must be made payable to FIRST CONTACT.



Australian Government

NO REFUNDS GIVEN.
Post Registration Form and Money Order or Bank Cheque for Entry Fees to:
**First Contact, P.O. Box 941,
Mt. Gravatt, Q 4122**



PHOTOCOPY THIS PAGE IF YOU REQUIRE EXTRA REGISTRATION FORMS