

INITIAL TEAM NOMINATIONS FORM

Initial team nominations must be submitted by Wednesday 28th February at 9:00AM

CLOBBLIAILS	
NAME:	
GROUND ADDRESS:	
POSTAL ADDRESS:	
GUERNSEY COLOURS:	
HOME SHORT COLOURS:	
SOCK COLOURS:	
CONTACTS	
CLUB DELEGATE (this perso	n will receive all SANFL Juniors competition, coaching and umpiring
communications)	
NAME:	MOBILE:
EMAIL:	
NON-PREMIERSHIP COORI	DINATOR (this person will receive all SANFL Juniors non-premiership
competition communications	5)
NAME:	MOBILE:
EMAIL:	
PREMIERSHIP COORDINAT	OR (this person will receive all SANFL Juniors premiership competition
communications)	
NAME:	MOBILE:
EMAIL:	
GIRLS COORDINATOR (this	person will receive all SANFL Juniors girl's competition communications)
NAME:	MOBILE:
EMAIL:	
COACH COORDINATOR (th	is person will receive all SANFL Juniors coach related communications)
NAME:	MOBILE:



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AGE GROUP	NUMBER OF REGISTRATIONS	NUMBER OF TEAMS	DIVISIONS (Please Tick)
UNDER 7 (Minis)			
UNDER 8			
UNDER 8 GIRLS			
UNDER 9			
UNDER 10			
UNDER 10 GIRLS			
UNDER 11			18-a-side 15-a-side
UNDER 12			1 2 3 4 5
UNDER 12 GIRLS			1 2 3 4 5
UNDER 13			
UNDER 14			
UNDER 14 GIRLS			
UNDER 15			
UNDER 16 GIRLS			
UNDER 16			
UNDER 17.5			
UNDER 18 GIRLS			