I (Your Name)	
of the (Teams Name)	
Warrant and declare that I, on behalf of al declaration and accordingly on behalf of th will participate in ALL games programmed	e team named on this from, declare that w
I further agree that, on behalf of all the Busselton, the agents and employees of the all claims, however arising, which may res presence within the Geographe Leisure Cen	Geographe Leisure Centre against any and sult from my teams use, participation in o
Photographs of team members may be tak for promotional purposes.	en & used by the Geographe Leisure Centr
Note: Having completed this declaration is have a copy of the Centre Bylaws and that aware of them.	
INSURANCE: The City of Busselton is <b>not</b> Player/team insurance is available, cover contact your local insurance consultant for	ring official matches and training, pleas
Please read all information carefully prio forfeit fee information.	r to signing this form and initial next t
FORFEITS Forfeiting a gam	e may incur a fee.
After 12pm on game day	<u>ı</u> : <b>\$130.00</b>
Before 12pm on game do	<u>u</u> \$65.00
More than 24 hours noti	<u>ce:</u> No charge.
<u>Initial Here</u> -	
Signature of Captain	Date
Signature of Staff	Date

# Social Netball

Played Thursday mornings, all year round. Umpires and Bibs are provided.

### **WOMENS Competition**

Enjoy the company of your friends, while gaining the benefits of exercise, in a social competition at the GLC.

Minimum age 15.

## **Nominations Open:**

Thursday 20 March 2025

**Nominations Close:** 

Sunday 6 April 2025

(OR when competitions is full)

**Competition Starts:** 

Thursday 8th May 2025

Day:

**Thursday Mornings** 

Times:

From 9.15 am

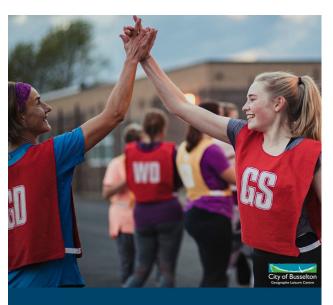
Price:

\$65.00 per team, per week

**NOMINATION FEE:** 

\$65.00

Payable with Nomination form. (NON-REFUNDABLE).



# SOCIAL NETBALL

Thursday Morning

**Nomination Form** 



# Geographe Leisure Centre

1 Recreation Lane, West Busselton E: glcmembership@busselton.wa.gov.au P: 9754 3600

# **TEAM NOMINATION FORM 2025**

DATE PAID	8. FORF		above ar	7. FIXTU		MOMINA	6. NOMI					First Name	4. PLAYERS LIST	LADIES	TEAM NAME:	3. TEAM	EMAIL:	PHONE: (H)	ADDRESS:	NAME	2. ALTER	EMAIL:
	8. FORFEITS (Office use only)		above and understand I am responsible for handing a copy to all team members.  SIGNED:	7. FIXTURES <i>(Office use only)</i> 1		NOMINATION BOND	6. NOMINATION BOND <i>(Office use only)</i>						SIT S	ES	AME:	3. TEAM NAME / DIVISION 1 or 2 or 3		(H)	S:		2. ALTERNATE TEAM CONTACT	
<del>,</del>	e use only		tand I am	e use onli			OND <i>(Offi</i>					Surname E				IVISION 1		(1			M CONT!	
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