

**METROPOLITAN EAST PRIMARY SCHOOLS HOCKEY  
NOMINATION FORM - REGIONAL TEAM**

**PERSONAL DETAILS**

**FULL NAME:** \_\_\_\_\_  
**DATE OF BIRTH:** \_\_\_\_\_

**DISTRICT:** \_\_\_\_\_ **UNIFORM NO.:** \_\_\_\_\_  
**SCHOOL:** \_\_\_\_\_ **YEAR LEVEL :** \_\_\_\_\_

**PLAYING DETAILS**

**PREFERRED PLAYING POSITIONS:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**PREVIOUS PLAYING EXPERIENCE (List most recent first):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I acknowledge that, if successful in being selected in the Metropolitan East Regional Hockey Team, I shall be required to pay for uniforms, equipment, transport and a levy to attend the State Championships in Toowoomba from the 16 June – 19 June 2010.**

**Student Name:** \_\_\_\_\_  
**Student Signature:** \_\_\_\_\_  
**Parent Name:** \_\_\_\_\_  
**Parent Signature:** \_\_\_\_\_