

2010 VICKI WILSON CUP NOMINATION FORM

This document will be a tax invoice for GST when fully completed and you make a payment – retain a copy. TAX INVOICE ABN 58 429 487 881

School Sport Region: i.e. Met. East	
School:	
Co-ordinator (Name):	
No. of teams (maximum 2)	
Postal Address:	
Phone & fax number:	Ph: _____ Fax: _____
Email (COMPULSORY):	
Name of Coach:	
Name of Umpire:	
Badge Level of Umpire:	
Principal Approval:	YES <input type="radio"/> NO <input type="radio"/>
Principal Signature:	

Note: Details of Preliminary Rounds will be posted on the Netball Queensland website www.netballq.org.au by 1st April 2010.

NOMINATION FEES: \$60.00 (Incl. GST) per team

No. of teams (max 2) _____ x \$60.00 per team (Incl GST 10%) = _____

Pay by Cheque M/Card Visa B/Card

(Cheques to be made out to Netball Queensland)

Name on card: _____ Expiry Date: _____

Signature: _____

Credit Card No: ____/____/____/____ ____/____/____/____ ____/____/____/____ ____/____/____/____

CLOSING DATE: FRIDAY 19TH MARCH 2010
Nominations WILL NOT be accepted after this date and are non refundable.

Please return with payment to: Netball Queensland
 PO BOX 50 Moorooka QLD 4105
 Fax: 3848-6221