

# NETBALL WA ABORIGINAL YOUTH GALA DAY SUNDAY 7 APRIL 2019

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## TEAM NOMINATION INFORMATION

### NOMINATION DOCUMENTS

Please provide the information below to [sarah.gray@netballwa.com.au](mailto:sarah.gray@netballwa.com.au) when registering:

1. Coordinator Contact Details & Team Name
2. Team Nominations Summary (player names must be submitted)
3. Team Payment Details (**payment must be made at time of team registrations**)
4. Player and Officials Registration Form (1 form per team nominated)
5. Working with Children Check Information (WWCC) (photocopy of card preferred)

### TEAM FEES

2019 Aboriginal Youth Gala Day team fees contribute to the following:

- Awards & Trophies
- Venue hire, court hire and venue operations
- 1 x match balls per team
- First aid service (does not include strapping for pre-existing injuries)
- Event insurance for players, coaches and team officials

### CLOSING DATE

- Registrations must be received no later than **Friday 22 March 2019**

### FIXTURES AND DIVISIONS

All efforts will be made to make the competition as fair and equitable as possible. Pending team nominations fixtures will be released two – three days prior to the competition.

### WORKING WITH CHILDREN CHECK

Any official that is registered with a team (i.e. coach, manager) must submit their Working with Children Check (WWCC) details, unless they are under 18, or if they have a child playing within that team.



## 1. COORDINATOR CONTACT DETAILS

Team Name			
Coordinator Name			
Coordinator Phone	Ph		M
Coordinator Email			

## 2. TEAM NOMINATIONS SUMMARY

Division (Ages are as of 31 December in the year of competition)	Team Fee (GST Inc)	Number of Teams	Total Due
12 & Under Division	\$130.00		\$
14 & Under Division	\$130.00		\$
16 & Under Division	\$130.00		\$
18 & Under Division	\$130.00		\$
18 & Under Boys Division	\$130.00		\$
TOTAL ENTRY FEES ALL TEAMS			\$
TOTAL AMOUNT DUE			\$

Carnival rules state that a minimum of **five** Aboriginal or Torres Strait Islander players must be on court at one time.

## 3. TEAM PAYMENT DETAILS

VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> CHEQUE <input type="checkbox"/> (check box to indicate payment method)			
Name on Card			
Card No			
Card Expiry	/	CCV	
Signature		Date	
Receipt Required (receipts will be sent via email to the Coordinator)			Y <input type="checkbox"/> N <input type="checkbox"/>

**Note – teams are only officially registered once payment has been received**



### 4. PLAYER & OFFICIALS REGISTRATION FORM (1 FORM PER TEAM)

Team # 1 Name					
Age Group (please check 1 box)	12U <input type="checkbox"/>	14U <input type="checkbox"/>	16U <input type="checkbox"/>	18U <input type="checkbox"/>	18U Boys <input type="checkbox"/>
Team Manager	Name				
	Email				
	Ph		WWCC #		
Team Coach	Name				
Team Coach Player Name	Email				
	Ph				
	DOB	Identified as Aboriginal or Torres Strait Islander? (Y / N)	WWCC #		
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					

**IMPORTANT** Are all team participants cleared for photography consent? YES or NO (please circle) if NO this team will not be photographed at the 2019 Youth Gala Day event



Team # 2 Name				
Age Group (please check 1 box)		12U <input type="checkbox"/> 14U <input type="checkbox"/> 16U <input type="checkbox"/> 18U <input type="checkbox"/> 18U Boys <input type="checkbox"/>		
Team Manager	Name			
	Email			
	Ph		WWCC #	
Team Coach	Name			
Team Coach Player Name	Email			
	Ph			
	DOB	Identified as Aboriginal or Torres Strait Islander? (Y / N)	WWCC #	
1.				
2.				
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6.				
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12.				

**IMPORTANT** Are all team participants cleared for photography consent? YES or NO (please circle) if NO this team will not be photographed at the 2019 Youth Gala Day event



Team # 3 Name				
Age Group (please check 1 box)		12U <input type="checkbox"/> 14U <input type="checkbox"/> 16U <input type="checkbox"/> 18U <input type="checkbox"/> 18U Boys <input type="checkbox"/>		
Team Manager	Name			
	Email			
	Ph		WWCC #	
Team Coach	Name			
Team Coach Player Name	Email			
	Ph			
	DOB	Identified as Aboriginal or Torres Strait Islander? (Y / N)	WWCC #	
1.				
2.				
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**IMPORTANT** Are all team participants cleared for photography consent? YES or NO (please circle) if NO this team will not be photographed at the 2019 Youth Gala Day event



Team # 4 Name				
Age Group (please check 1 box)		12U <input type="checkbox"/> 14U <input type="checkbox"/> 16U <input type="checkbox"/> 18U <input type="checkbox"/> 18U Boys <input type="checkbox"/>		
Team Manager	Name			
	Email			
	Ph		WWCC #	
Team Coach	Name			
Team Coach Player Name	Email			
	Ph			
	DOB	Identified as Aboriginal or Torres Strait Islander? (Y / N)	WWCC #	
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**IMPORTANT** Are all team participants cleared for photography consent? YES or NO (please circle) if NO this team will not be photographed at the 2019 Youth Gala Day event

