



## REGIONAL TEAM REGO FORM

NAME OF TEAM:			
CLUB:	ERJSA		
AGE GROUP:	U/9	U/10	U/11 U/12 ( PLEASE CIRCLE )
COACH/MANAGER:			
CONTACT NUMBER:	(H)	(W)	(M)

	PLAYER SURNAME	PLAYER FIRST NAME	D.O.B
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

A \$20 fee is payable for each player please forward money and rego form to ERJSA Treasurer NO LATER THAN 20<sup>TH</sup> JUNE - To: PO Box 1051, Rosny Park Tas 7018.

