





NETBALL WA ABORIGINAL YOUTH GALA DAY SUNDAY 1 MAY 2022

TEAM NOMINATION INFORMATION

NOMINATION DOCUMENTS

Please provide the information below to <u>competitions@netballwa.com.au</u> 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

2022 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 Wednesday 20 April 2022.

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.





200 Selby Street JOLIMONT 6014 PO Box 930 SUBIACO 6904 Tel: (08) 9380 3700 Fax: (08) 9380 3799 Email: <u>info@netballwa.com.au</u>

www.netballwa.com.au





1. COORDINATOR CONTACT DETAILS

Team Name			
Coordinator Name			
Coordinator Phone	Ph	М	
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					
NetSetGO (8–10 year old)	EOI*							
12 & Under Division	\$270.00		\$					
14 & Under Division	\$270.00		\$					
16 & Under Division	\$270.00		\$					
18 & Under Division	\$270.00		\$					
18 & Under Boys Division	EOI*		\$					
TOTAL EN	LL 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.

*Expressions of Interest (EOI) – These divisions will pend number of nominations. No fee applicable

3. TEAM PAYMENT DETAILS

VISA MASTERCARD CHEQUE (check box to indicate payment										
method) Name on Card										
/	CCV									
	Date									
Receipt Required (receipts will be sent via email to the										
Coordinator)										
	/ will be sent via email to the	/ CCV Date will be sent via email to the	/ CCV Date							

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



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

Team	n # 1 Name							
	Group se check 1 box)	NSG [] 12l J Boys	J	14U	□ 16U	□ 18U	
		Name						
Team Coach		Email						
		Ph				WWCC #		
Playe	r Name			DOB		Identified as Strait Islande		Torres
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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 2022 Aboriginal Youth Gala Day









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Team	n # 2 Name									
	Group se check 1 box)		NSG 12U 14U 16U 18U 18U 18U 18U 18U 18U 18U 18U 18U 18							
		Name								
Team Coach		Email								
		Ph				WWCC #				
Playe	er Name			DOB		Identified as Strait Islande	Aboriginal or Torres er? (Y / N)			
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Team	n # 3 Name									
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		Name								
Team	Team Coach									
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Team # 4 Name								
Age Group (please check 1 box)								
	Name							
Team Coach	Email							
	Ph		WWCC #					
Player Name		DOB	Identified as Aboriginal or Torres Strait Islander? (Y / N)					
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Team	n # 5 Name									
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Team Coach		Name								
		Email								
		Ph				wwc	C #			
Playe	er Name	<u> </u>	DOB			Identified as Aboriginal or Torres Strait Islander? (Y / N)				
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		Name						
Team	n Coach	Email						
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Playe	r Name			DOB		Identified as Strait Islande		Torres
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	Name				
Team Coach	Email				
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Player Name			DOB	Identified as Strait Islande	Aboriginal or Torres er? (Y / N)
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		Name						
Team Coach		Email						
		Ph				WWCC #		
Player Name			DOB			Identified as Aboriginal or Torres Strait Islander? (Y / N)		
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Team Coach		Name						
		Email						
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Playe	er Name			DOB		Identified as Strait Islande		Torres
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Team # 10 Name									
Age Group (please check 1 box)		NSG 12U 14U 14U 18U Boys				□ 16U		18U	
Team Coach		Name							
		Email							
		Ph				WWCC #			
Playe	er Name			DOB		Identified as Aboriginal or Torres Strait Islander? (Y / N)			Torres
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