

# Midwest Gascoyne West Coast Fever Primary Schools Cup 2026 Team Nomination Form Friday 12 June 2026

## Team Nomination Form

Please send the information listed below to [mw.membership@netballwa.com.au](mailto:mw.membership@netballwa.com.au) when registering:

- Team Nominations Form
  - Coordinator contact details
  - School payment details (payment details to be provided at time of team registrations with payment to be processed no later than Tuesday 9 June 2026)
  - Each School will be required to pay a \$44 GST Inc. nomination Fee per team.
- Player and Officials Registration Form (1 Form Per Team)

## Team Fees

2026 MWG WCF Primary Schools Cup team fee contributes to the following:

- Awards & trophies
- Venue hire, and venue operations
- Event insurance for players, coaches, and team officials

## Closing Date

Registrations & Team Entries must be received no later than **Monday 25 May 2026**

## Age Categories

All age categories are mixed (girls/boys) and relate to Western Australian School Years as follow:

- Year 4 mixed
- Year 4/5 mixed
- Year 5 mixed
- Year 5/6 mixed
- Year 6 mixed



## Team Nomination Form

### School Details

Name			
Town/Suburb			

### Coordinator Contact Details

Name			
Phone		Mobile	
Email			

### Team Nominations Summary

Age Categories	Number of Teams	Team Fee	Total Due
Year 4 Mixed			
Year 4/5 Mixed			
Year 5 Mixed			
Year 5/6 Mixed			
Year 6 Mixed			
<b>Totals</b>			
<b>Total Amount Due</b>			

### Person Responsible for Payment

Name		Mobile	
Email			

### School Payment Details

Preferred payment method  
 If you wish to pay over the phone, please contact Finance 08 9380 3705.

VISA  
  MASTERCARD  
  Invoice

Name on Card			
Card No			
Card Expiry		CCV	
Signature		Date	

Receipt Required  Yes  No (receipt will be sent via email to the person responsible for the payment)

Teams will be only officially registered once payment has been received, along with the below **Player and Officials Registration Form**. **Payment will be processed on receipt of this form.**

A confirmation email will be sent to the Coordinator.

## Player and Officials Registration Form

### Player and Officials Registration Details (1 Form Per Team)

School Name	
Team Name	
Age Group	<input type="checkbox"/> Year 4 Mixed <input type="checkbox"/> Year 4/5 Mixed <input type="checkbox"/> Year 5 Mixed <input type="checkbox"/> Year 5/6 Mixed <input type="checkbox"/> Year 6 Mixed            (please check 1 box)
Team Manager	<b>Name:</b>
	<b>Email:</b>
	<b>Contact:</b>
Team Coach	<b>Name:</b>
	<b>Email:</b>
	<b>Contact:</b>

### Player's Details

#	Player Name	Date of Birth	Gender Identity	Identified as Aboriginal or Torres Strait Islander
1.				<input type="checkbox"/> Yes <input type="checkbox"/> No
2.				<input type="checkbox"/> Yes <input type="checkbox"/> No
3.				<input type="checkbox"/> Yes <input type="checkbox"/> No
4.				<input type="checkbox"/> Yes <input type="checkbox"/> No
5.				<input type="checkbox"/> Yes <input type="checkbox"/> No
6.				<input type="checkbox"/> Yes <input type="checkbox"/> No
7.				<input type="checkbox"/> Yes <input type="checkbox"/> No
8.				<input type="checkbox"/> Yes <input type="checkbox"/> No
9.				<input type="checkbox"/> Yes <input type="checkbox"/> No
10.				<input type="checkbox"/> Yes <input type="checkbox"/> No
11.				<input type="checkbox"/> Yes <input type="checkbox"/> No
12.				<input type="checkbox"/> Yes <input type="checkbox"/> No

### Photography Permission

Do **all** team members, including players and officials (Team Manager and Team Coach), consent to Netball WA taking and using images or videos from the MWG WCF Primary Schools Cup?

Yes, **all** players and officials consent to give their photo permission  
 No, **not all** players and officials consent to give their photo permission

Please email completed form to [mw.membership@netballwa.com.au](mailto:mw.membership@netballwa.com.au)