

NB : PLAYERS WITHOUT I.D. NUMBERS WILL NOT BE ACCEPTED



GAUTENG NETBALL ASSOCIATION



REGION: EASTERN GAUTENG NETBALL

LEAGUE ENTRY FORM 2010

NAME OF CLUB	:			
POSTAL ADDRESS	:			
VENUE & DAYS OF PRACTICE	:			
PRESIDENT	:			
ADDRESS	:			
TELEPHONE	:	(H)	(W)	CELL :
FACSIMILE	:	(W)	E Mail Address	
SECRETARY / LEAGUE	:			
ADDRESS	:			
TELEPHONE	:	(H)	(W)	CELL :
FACSIMILE	:	(W)	E Mail Address	
TREASURER	:			
ADDRESS	:			
TELEPHONE	:	(H)	(W)	CELL :
FACSIMILE	:	(W)	E Mail Address	
LEAGUES TO BE ENTERED IN 2009	:	LEAGUE PLAYED IN 2009	POSITION AT END OF 2009	LEAGUE IN 2009
1ST TEAM	:			
2ND TEAM	:			
3RD TEAM	:			
4TH TEAM	:			
5TH TEAM	:			
6TH TEAM	:			
Mix TEAM	:			
Men Team	:			

This form must be return to the office, 086 514 7354 no later than 1st March 2010