



## Team Registration Form


**NEW SEASON Starts end July 2020**


**Team Name:** \_\_\_\_\_

**Previous Team Name (if any)** \_\_\_\_\_

**Uniform Colours:** \_\_\_\_\_

**Contact Names: Please put TWO contact names and numbers**

1. \_\_\_\_\_  \_\_\_\_\_ email: \_\_\_\_\_

2. \_\_\_\_\_  \_\_\_\_\_ email: \_\_\_\_\_

<i>Players Name</i>	<i>Previous team name &amp; division</i>
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	

On behalf of the members of the team, I accept all the conditions and By-laws of the Association. I accept that KNSC is not liable for costs as the result of an injury on, during or after a netball game. I understand that all players must turn 16 years of age in the current playing year (By 31st December 2020).

I do/do not give permission for my phone number and or email address to be given to other team captains to assist with fill ins to avoid forfeits.

Signed (Team Captain)

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