CANBERRA CITY AND SUBURBAN CRICKET ASSOCIATION
NOMINATION / REGISTRATION FORM

SEASON :_____

Name of Club:	

Number of Teams and preferred Grade:

1st Grade	
2nd Grade	
3rd Grade	
4th Grade	
5th Grade	

Please note that Nomination in a particular Grade does not guarantee placement in that Grade

CONTACT DETAILS:

PRESIDENT

Name		
Address		
Suburb	State	PostCode
Home Phone (02)	Work Phone (02)	
Mobile #	Fax Number (02)	
e:mail address		

TREASURER

Name		
Address		
Suburb	State	PostCode
Home Phone (02)	Work Phone (02)	
Mobile #	Fax Number (02)	
e:mail address		

TEAMS CONTACT

Name		
Address		
Suburb	State	PostCode
Home Phone (02)	Work Phone (02)	
Mobile #	Fax Number (02)	
e:mail address		

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Signature: Club Authorised Delegate Print Name Date