**Representative Team Nomination Form**

|  |  |  |
| --- | --- | --- |
| Name |  | Male / Female |
|  |  | Date of Birth |  |
| Address |  |
|  |  |
| Home Phone |  | Mobile |  |
| Email |  |
|  |
| Preferred Playing Positions | 1. |  |
|  | 2. |  |
|  | 3. |  |

**I wish to nominate for selection in the Fraser Coast Representative Team for 2017.**

Boys&Girl’s U/13, U15, U18 (tick the appropriate division below)

I am eligible and available to nominate for:

* State Championships U/13,(1st - 4th July) Girls Maryborough - Boys Gladstone
* State Championships U/18(25th – 27th June)Women Tweed Border - MenToowoomba
* State Championships U15 (17th – 20Th Sept) Girls Ipswich – Boys Rockhampton

Nominations close & forms to be submitted by; U13&U18 nominations close 5 pm 30th April 2017

U15 nominations close 5 pm 17th July 2017.

Completed nomination forms can be emailed to: herveybayhockeyinc@hotmail.comor mdha@bigpond.com

A $50 nomination fee is required when nominating for Fraser Coast representative team selection. The nomination fee can be paid by EFT to the respective Associations bank account details as follows:

|  |  |
| --- | --- |
| HERVEY BAY ACCOUNTANZ Bank Account name: Hervey Bay Hockey Association Inc. BSB 014-699 Acc No. 3693 50553  | MARYBOROUGH ACCOUNTANZ Bank Account name: MDHA Inc.BSB: 014655 Acc No: **2283 03999**  |

**Please place your Surname and U18 or U13 B or G as your reference**

|  |  |  |
| --- | --- | --- |
| Players Signature: |  | Date: / / 2017 |
| Parent / Guardian (if under 18 years) |
| Name: |  | Contact Number |  |
| Signature: |  | Date: / / 2017 |

**Information regarding coaches, managers and training dates & venues will be advised soon. Managers will advise approximate costs and travel plans as soon as they are available.**