

ACT SUNDAY SOCIAL CRICKET ASSOCIATION

2016-17 EXISTING TEAM NOMINATION FORM

TEAM NAME _____

TEAM CONTACT 1: _____

PHONE NUMBERS _____

EMAIL ADDRESS _____

TEAM CONTACT 2: _____

PHONE NUMBERS _____

EMAIL ADDRESS _____

GRADE / POSITION FINISHED LAST YEAR _____

HOME GROUND PREFERENCE –
NORTH/ SOUTH/ CENTRAL/ NO PREFERENCE (indicate one only)

ADDRESS TO SEND DRAW AND RECEIPT

Nomination form and entry fee of **\$800** must be received by 26 August 2016

Forms and payment can be submitted

- in person at the Annual General Meeting [7.00pm Friday 26 August 2016 – Aegean Room, Hellenic Club, Matilda Street, Woden] or
- by post to ACTSSCA, 37/66 Allara Street, Canberra City, ACT, 2601

If paying by direct debit a **copy of the successful funds transfer receipt MUST be attached to the nomination form**

Cheques or money orders payable to: ACTSSCA	Direct debit: Account Name: ACT Sunday Social Cricket Association Inc BSB: 082902 Account No: 489743706
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For queries contact:
Angus Algie, President ACTSSCA
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0404 142 144
www.actsocialcricket.com