

ACT SUNDAY SOCIAL CRICKET ASSOCIATION

2025-26 NEW TEAM NOMINATION FORM

TEAM NAME _____

Teams must supply details of two team contacts

TEAM CONTACT 1 _____

PHONE NUMBER(S) _____

EMAIL ADDRESS _____

TEAM CONTACT 2 _____

PHONE NUMBER(S) _____

EMAIL ADDRESS _____

HOW DID YOU LEARN ABOUT THE COMPETITION?

website / online advert/ word-of-mouth / other (please describe)

PREVIOUS CRICKET EXPERIENCE (for grading purposes) _____

HOME GROUND PREFERENCE –

NORTH/ SOUTH/ CENTRAL/ NO PREFERENCE (indicate one only)

Nomination form and entry fee of **\$1050** must be received by 5 September 2025

Forms and payment can be submitted

- in person at Annual General Meeting (7.00pm Friday 5 September 2025 – Belconnen Labor Club at 51 Chandler Street, Belconnen) or
- by post to ACTSSCA, 303/35 Furzer Street, Phillip, ACT, 2606

If paying by direct debit a **copy of the successful funds transfer receipt** **MUST** be emailed to **actsocialcricket@yahoo.com**

Cheques or money orders payable to:

ACTSSCA

Direct debit:

Account Name: ACT Sunday Social
Cricket Association Inc

BSB: 082902

Account No: 489743706

For queries contact:

Angus Algie, President ACTSSCA

actsocialcricket@yahoo.com

0404 142 144

www.actsocialcricket.com

APPLICATION FOR MEMBERSHIP OF THE ACT SUNDAY SOCIAL CRICKET ASSOCIATION

*(applicants to **complete sections 1-6** and submit the form for endorsement)*

(1) ACT SUNDAY SOCIAL CRICKET ASSOCIATION Incorporated (incorporated under the *Associations Incorporation Act 1991*), I,

(2) _____ ,
(full name of applicant)

of

(3) _____ ,
(address)

(4) _____ ,
(occupation)

hereby apply to become a member of the above named incorporated association. In the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.

(5) _____
(signature of applicant)

(6) _____
(date)

I, _____
(full name)

a member of the association, nominate the applicant, who is personally known to me, for the membership of the association.

(Signature of proposer)

(date)

I, _____
(full name)

a member of the association, second the nomination of the applicant, who is personally known to me, for membership of the association.

(Signature of proposer)

(date)