
POOL VICHEALTH CARNIVAL

POTTERS POOL HALL DANDENONG

SUNDAY 1ST JULY 2018



HEALTH THROUGH POOL



TEAM REGISTRATION FORM

League Name: Team Name:

Expected Division:.....(Allocated by League. **NOT** guaranteed)

No.	<u>Player Names</u> (rank order)	<u>Current Playing Div'n</u>
1.
2.
3.
4.
5.
6.
7.

Emergencies: *

1.
2.
3.

* Emergencies can be substituted in prior to a round commencing.

My Team agrees to abide by the conditions of entry as stated on this entry form and will abide by all rules and Committee decisions.

Signature:

Date:..... / /

Name:

(Team Capt.) Phone: