

SUMMER HOCKEY 2017

TEAM NOMINATION FORM

Nominations close 20th October , 2017, please return forms to

facilitiesmanager@rockinghamhockey.org.au confirmation will be sent, so after a couple of days if no confirmation of receipt of nomination please contact

Alan 0409084325

Team Charge of \$500; To be collected by Team co coordinator and paid as one sum directly in club's bank account Bendigo Bank BSB 633-000 A/c RDHC No. 142356419

TEAM NAME:

TEAM Contact name.....

Contact number:

Email address:

Nominated Colour Shirt.....

MIXED SOCIAL Thursday Night 1st game 2nd November

MIXED VETS (O/35s) Friday Night 1st game 3rd November

Players: 1. 2.

3..... 4.....

5..... 6

7..... 8.....

9..... 10.....

