

Club Competition Registration Form 2017

To be handed in at Control Room, email reception@aucklandnetball.co.nz or post to: Jacqui Foote | PO Box 18257, Glen Innes

All Registration forms **MUST** be completed in full and received by the ANC office no later than 5pm on 29 March 2017.

The below information is collected and held by Auckland Netball Centre and will be used for the following purposes: Administering of Auckland Netball Centre, Auckland Netball Centre may communicate information and promotional material on behalf of our authorised sponsors. Individuals have the right to access and correct information held by Auckland Netball Centre at any time.

Name of Club: _____

Team # / Name: _____

Names of Players <small>Please complete ALL FIELDS</small>	Full Address <small>(including suburb eg Mt Eden)</small>	Email Address <small>to receive updates & information</small>	Mobile or Phone	Ethnicity <small>For funding applications</small>	Date of Birth	Signature*	Primary Centre*
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*Due to the zonal changes, players can now play Club netball at more than 1 centre as long as those centres fall within the Northern Zone region. Players must be affiliated either by playing for School or Club to nominate to trial for an Auckland Netball representative age group team. If you intend on trialing for a representative team and Auckland is NOT your primary centre, please indicate what centre you will be trialing for. Those that trial for Auckland and are not selected can apply for a release to trial at another centre.

Name	Email	Telephone Home	Telephone Work	Mobile
Coach				
Manager				

