

**U16 Junior Regional League Qualifying Tournament 2024**

**Registration Sheet – 30th June**

# Team Name

This Registration Sheet must be emailed to Kathy Stripp to be received no later than 9th June 2024 in order that membership can be checked.

To be returned to: Kathy Stripp, Tournament Organiser

Tel: 07989636393 Email: kathyandpercy@btinternet.com

|  |  |  |  |
| --- | --- | --- | --- |
|  | Name | **Membership Number** | **Date of birth** |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
| 7 |  |  |  |
| 8 |  |  |  |
| 9 |  |  |  |
| 10 |  |  |  |
| 11 |  |  |  |
| 12 |  |  |  |
| Bench |  |  | Please indicatewhich member of the Bench has been nominated as the Primary Carer and what qualification he/she holds (if any). |
| Bench |  |  |
| Bench |  |  |
| Bench |  |  |
| Bench |  |  |
| Umpire  |  |  |

 Teams will be allowed to make changes to the Registration Sheet on the day of the Tournament, but any amendments must be accompanied by proof of membership.

 Only the designated Primary Carer will be allowed on court during an injury stoppage

 Only players and officials named on the Registration Sheet will be allowed on the Bench

I confirm that the information provided is correct and that all participants have given consent for close range photography to take place at this competition

Signed Date