WOMEN’S BEGINNER’S FESTIVAL

REGISTRATION FORM

|  |  |
| --- | --- |
| Team Name |  |
| Team Administrator |  |
| Email Address |  |
| Contact Number |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Player Name | Date of Birth | Email Address | Mobile Number | Emergency Contact (and Contact Number) |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |
| 5. |  |  |  |  |
| 6. |  |  |  |  |
| 7. |  |  |  |  |
| 8. |  |  |  |  |
| 9. |  |  |  |  |
| 10. |  |  |  |  |
| 11. |  |  |  |  |
| 12. |  |  |  |  |