Club Form 03 Top 11 Nomination Form

Player List

Forms to be completed by clubs with more than one senior team and supplied emailed by the 3rd Competition Round admin@graftonhockey.com.au

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| **Club**: |  |
| **Team Name:** |  |
|  | **Grade:** |  |  |
|  |
|  | **Surname:** | **Christian Name:** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| 9 |  |  |
| 10 |  |  |
| 11 |  |  |

If no assigned manager, please enter the contact details of the team captain.

|  |  |
| --- | --- |
| **Club Contact:** |  |
| **Email:** |  | **Phone:** |  |