NOMINATION FORM — INDOOR NETBALL

www.cisc.net.au

Phone- (07) 5495 5570 CABOOLTURE INDOOR SPORTS CENTRE Fax- (07) 5495 5366
82 Lear Jet Drive, Caboolture

SPRING SEASON 2008

SEASON STARTS..
MIXED - Sunday 7th Sept '08
LADIES - Wed 10th Sept '08

Team Name: _____

Grade: _____ **(preferred)** **Grade:** _____ **(last season)**

Captain: _____ **Phone:** _____ **(H)** _____ **(W)**

PLAYING NIGHTS & TIMES

- ***LADIES*:- play Wednesdays**
  - **5.30pm, 6.15pm, 7.00pm,7.45pm, 8.30pm, 915pm**

New Thursday Night Option (must still be able to play Wed nights)
- **Can your team play any Thursday Games??? Y ☐ N ☐**
- **6.30pm,7.15pm,8.00pm**

- ***MIXED*:- play Sundays:- (5.15pm), 6.00pm, 6.45pm, 7.30pm (8.15pm)**

TIME PREFERENCES

Captains should indicate below the times they're definitely *UNABLE* to field a team. Those teams unable to play early games will get the majority of late games and vice versa.

TIMES *UNABLE* TO PLAY:- WEDNESDAY - ....., ..., ..., ...

SUNDAY -------- ....., ..., ...

CAPTAIN'S COMMENTS:

!!! WARNING !!!

The use of all facilities at this centre, including carparking, is entirely at patrons own risk. We do not provide player insurance but do ask that team captains ensure players are aware of the dangers that are involved with indoor sports courts.

Captains Signature: _____

TEAM CAPTAINS MUST PASS ON TO ALL TEAM MEMBERS INFORMATION REGARDING LOCAL RULES, CONDITIONS & WARNINGS!!!