

# NOMINATION FORM



# BEACH VOLLEYBALL

www.cisc.net.au

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

**SUMMERSEASON 2010**  
**SEASON DATES**  
Mixed/Ladies 4's - 27th Sept (M, T & W's)  
Open 4's/Pairs - 23rd Sept (Th)

**Team Name:** \_\_\_\_\_

**Captain:** \_\_\_\_\_ **Phone:** (H) \_\_\_\_\_ (W/M) \_\_\_\_\_

**Grade:** (Opens/Ladies/Mixed) \_\_\_\_\_ (2's/4's) \_\_\_\_\_

## TEAM MEMBERS (if known)

NAME ADDRESS PHONE

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## TEAM PREFERENCES

Evening (M,T,W,Th)	Game Times (6.20, 7.00, 7.40, 8.20)
Best.....	Best.....
2nd.....	2nd.....
3rd.....	3rd.....

**Captain's Comments:**  
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## PLEASE NOTE

This Centre now provides Participant Insurance for All Players.  
For full details, please see centre notice boards or visit our website  
www.cisc.net.au

**Captain's Signature:** \_\_\_\_\_

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