

# NOMINATION FORM



**Townsville**

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For all your game times and ladder positions visit our web site at **www.citibeach.com.au**  
 Season: **AUTUMN 2010** Start date: **15 FEBRUARY 2010**

Team Name .....WEB DOWNLOAD  
 Captain .....  
 Address ..... Post Code .....  
 Phone (H) ..... (W) ..... (M) .....  
 e-Mail\* ..... \*You will be placed on our mailing list

## COMPETITIONS

## DIVISION

MON	TUES	WED	THURS	FRI	
<input type="checkbox"/> OPEN 4s	<input type="checkbox"/> MIXED 6s	<input type="checkbox"/> MIXED 6s	<input type="checkbox"/> LADIES 2s	<input type="checkbox"/> OPEN 4s	1-3  ..... 1=HIGHEST
	<input type="checkbox"/> OPEN 4s	<input type="checkbox"/> OPEN 4s	<input type="checkbox"/> OPEN 2s	<input type="checkbox"/> OPEN 2s	
				<input type="checkbox"/> JUNIORS	

## TEAM GAME PRICES

## TEAM NOMINATION FEES

SIXES-\$54 FOURS-\$44 PAIRS-\$22  
 FREE SAUSAGE SIZZLE ON FRIDAYS

SIXES-\$60 FOURS-\$40 PAIRS-\$20  
 DISCOUNT IF PAID B4 3RD GAME OF SEASON!

ASK ABOUT OUR SPECIAL FUNCTION CATERING OPTIONS

## TIME PREFERENCES

**AMEND WITH A X ANY TIME YOUR TEAM CANNOT PLAY.**

6s & 4s ☞  5:40  6:20  7:00  7:40  8:20  9:00  
 2s ☞  5:10  5:40  6:10  6:40  7:10  7:40  8:10  8:40  9:10

ALL TEAMS MUST BE AVAILABLE FOR EITHER EARLY GAMES OR LATER GAMES - SPREAD THE LOAD!!  
 ☆FOR ANY SPECIFIC TIME REQUIREMENT OR LIMITATION IN THE NEXT ROUND, YOU NEED TO  
 INFORM US 8 DAYS BEFORE THAT GAME☆

PLEASE INDICATE THE MAIN REASON/S WHY YOU NOMINATED YOUR TEAM

- |                                            |                                            |                                             |                                            |
|--------------------------------------------|--------------------------------------------|---------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Radio Ad          | <input type="checkbox"/> TV Ad             | <input type="checkbox"/> Paper/Magazine Ad  | <input type="checkbox"/> Renominating Team |
| <input type="checkbox"/> News Item         | <input type="checkbox"/> Web Site          | <input type="checkbox"/> CitiBeach Pamphlet | <input type="checkbox"/> Function          |
| <input type="checkbox"/> Friend's referral | <input type="checkbox"/> Played Previously | <input type="checkbox"/> Sunbus Poster      | <input type="checkbox"/> "Drive Past"      |

Please list any other teams (on any night) that any of your players play in

## PLAYERS PLAY AT OWN RISK!

*I hereby agree to the above conditions*

Captain's Signature ..... Date .....  
 Staff Signature .....  
 Comments .....