PRISTEEL UNITED			JMMER SOCCER NATION FORM	PO Box 242, Seven Hills NSW 1730
NIGHT PREFERRED :	MON	TUES	WED	
Division Preferred:	ONE	TWO	THREE	
Division LAST Year:				
TEAM NAME: TEAM OFFICIALS/CONTA ADDRESS:	CT NAME:_			
E-mail Address:				(Mandatory)
TELEPHONE:			WORK/MOBILE	
TEAM COLORS: It is required that ALL players wear the same uniform. Individual numbers are required on each Player's shirt - Competition rule.				
SHIRT: Main Color			TRIM:	
SHORTS: Main Color			SOCKS:	
NOMINATED REFEREE:			ALTERNATE	:
You are requested to sup The ball size is SIZE 5 and In order to nominate a Team a A maximum of ten (10) players TOTAL PLAYER NUMBER	d must be n minimum of must be reg S: No: of A	ew at the six (6) playe istered DULTS:	commencement of Rou ers must be registered.	und 1
	* No: of J	UNIORS: _		
* All Juniors players require co Ask one of the Organizing Co			-	ne first competition match.
Individual Player Registration I	Forms must b	e complete	d.	
THE TEAM BOND: All team to pay a \$100 Cash Bond be costs of Forfiets(\$30.00) and any of the above offences th any funds remaining from th	fore the com I Red Cards (en the full a	mencemen (\$20.00) pe mount will	t of the 1st Round. This E r player. If your Team or F be returned at the end of	Bond is used to cover the Players don't cause or recieve
AMOUNT ENCLOSED: \$ _			*BALANCE:	\$
				. I agree to abide by these rules that our supporters are orderly
Signed:			Date:	
(Team Official)				
* BALANCE OF FEES: Note th accepted ahead of teams that Official along with the letter of	are fully paid	. If this occu	rs, any part payment of fee	paid and as such will not be s will be refunded to the Team