

SEASON DATES: 2011-12, Season

WED: October 12th '11 – December 14th '11

THURS: October 13th '11 – December 15th '11

----- CHRISTMAS BREAK -----

WED: January 18th '12 – February 22nd '12

THURS: January 19th '12 – February 23rd '12

FEES

Team Entry:

\$550.00 per team

\$500.00 (2 or more teams)

(Must be same captain / organiser)

Please attach any vouchers that your team may have, or won from the '10-'11 season.

A minimum of \$300 deposit will be needed to secure your teams entry into this year's competition. The balance is due Round 1 of the season.

ENTRIES & PAYMENT

Online Entries:

You may pre enter online as well; once you have completed this process your payment is required before your entry is confirmed.

www.marketingsportnz.com
(Team Registrations)

Entries:

Can be posted to:

Westside Touch Association

P.O Box 16197,

Hornby, Christchurch 8441

Cheques:

Are to be made out to:

Westside Touch Association

Direct Debit:

Bank:

Bank of New Zealand

Account Name:

Westside Touch Association Inc

Account #:

02-0810-0037980-000

Branch:

Hornby

This transaction must have your team name as a reference, and an entry form is still required stating that you have paid by direct debit.

Credit Cards:

Not Accepted

Cash / Eftpos:

If you are paying cash please don't put it in the post, you can bring it into the following address:

(11am – 5pm week days)

Action Indoor Sports Stadiums

5-7 Iversen Tce, Waltham, Christchurch

Entry forms due by October 3rd '11

Please note this date does not guarantee your team an entry if we are already full. Teams will be informed as soon as possible once the competition is full so they can make other arrangements.

**Please turn over and fill in the
Required information**

Entry Form

(Effective as of August '11)

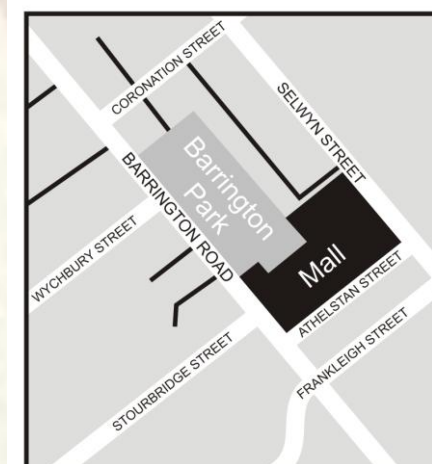


**Touch@Barrington
BARRINGTON PARK**

Spreydon, Christchurch

Ph 366-6718

Email: steve@marketingsportnz.com



Entry Form

(2011-12 season)

Team / Club Name

Last Year's Team Name

Team Captain / Organiser

Mail Address for correspondence

Street:

Suburb:

City / Postcode

/

(Postcode)

Email Address

(Please write email address clearly)

Contact Numbers

Mobile:

Home:

Work:

Grade: Available

Wed Men's / Wed Mixed / Thurs Mixed

Grade your team wish to play

Your team's ability

1 2 3 4 5 6 7 8 9 10
< Beginners (please circle) Experts >

Please note down below any other teams the your game time can't clash with,

Team Name:

Grade:

Team Name:

Grade:

Team Name:

Grade:

Team Name:

Grade:

Game Times:

Please note down any times your team can't possibly play,

We will endeavour to assist you in your request but you must note that it is not always possible.

If you prefer earlier games you will get less late games, and if you prefer later games you will receive less early game where possible.

Please put a cross in the boxes of the times you can't play, our games times are below.

6.00pm

6.30pm

7.00pm

7.30pm

(all games are 30min in duration)

Team Captain / Organiser to sign below

I have read the Module policy and entries conditions and agree with it all. I will to my best ability abide by the conditions that are set out for the module I am signing up for.

Captain / Team Organiser to sign below

Please note that receipts will be issued once your team has been accepted into the module for this season and payment has been made in full.