



Teams' Carnival Nomination Form

Tennis Seniors NSW

This form MUST be completed by EACH Team member
 Entries Close at 5.00 pm on Friday October 5, 2018.

Please complete ALL details in BLOCK LETTERS

Surname..... Preferred First Name.....

Player's Email..... Mobile:.....

CAPTAIN'S DETAILS (if known)

Representing Men/Women Age Group (Age @ 31/12/19)

PLEASE PRINT NAME/S

Order	National Rating	Surname	First Name	Date of Birth
1	N.....	.....	.....	...../...../.....
2	N.....	.....	.....	...../...../.....
3	N.....	.....	.....	...../...../.....
4	N.....	.....	.....	...../...../.....
5	N.....	.....	.....	...../...../.....
6	N.....	.....	.....	...../...../.....
7	N.....	.....	.....	...../...../.....

The following age groups will be catered for depending on the number of entries :-
 Men 35 40 45 50 55 60 65 70 75 80
 Women 35 40 45 50 55 60 65 70 75

Nomination Forms to be emailed to:
Tournament Secretary – Robyn Castle E: tenniseniorsnsw@bigpond.com
Payment to be made by Direct Deposit or
Cheque to PO Box 4803, North Rocks 2151

\$110.00 per person + \$40 per head State Dinner (Mon Jan 7)

Tennis Seniors NSW Inc. BSB: 032 044 Acc# 315 326