



2017 Summer 6's Junior Registration

summer6s.org.au / jr@summer6s.org.au

Team Name:

Playing Strip Colours:

Manager: Phone:

Mobile / SMS: Email:

Please register for: 10 - 11 Mixed 12 - 14 Mixed

****Age child is turning this year (2017) **All junior games are non-competitive, managers are encouraged to referee as there are no official referees.**

Early bird fee: \$500 per team (includes competition fee and insurance).

If nomination form and payment received by summer 6's no later than c.o.b Thursday 21st September 2017.

Registration fee: \$600 per team. **Closing date Thursday 28th September 2017 signed and dated team nomination form, all signed player nomination forms and payment must be received by this date. If not, your team will not be registered. A maximum of 24 teams are accepted. First in first served.**

Summer 6s will accept payment via the following methods:

Bank transfer / account name: summer 6s / bsb - 728-728 / account number: 22301843 / ref: your team name

Please email registration forms to jr@summer6s.org.au

* as at beginning of competition 12th October 2017. Email addresses will be added to our mailing list for competition and draw information. Please do not include email if you do not wish to receive this information. The maximum number of players per team is twelve with only ten being allowed to take the field per game. There are no exceptions.

Please note: The management of Summer 6s reserve the right to make the final decision on a team's grade. All details including full name, address, date of birth, age and contact phone number must be filled out. If players do not have this information, they will not be able to participate due to insurance requirements.

Please sign and date the following declaration:

I, team manager of hereby agree all members of the team above have been provided notified of the terms and conditions of the 2017, Summer 6s competition including the rules and regulations and insurance as outlined on the competition website summer6s.org.au. I have also advised all members of the team above that it is recommended to take out personal health insurance in case of any injury sustained during the competition.

Signed Date

Player Details

Player 1 Name: DOB Age*

Address

Phone Email

I confirm that the above information is correct and agree to the 2017 Summer 6's terms and conditions as detailed on its website summer6s.org.au

Signature Date
Parent / Guardian signature (if under 18)

Player 2 Name: DOB Age*

Address

Phone Email

I confirm that the above information is correct and agree to the 2017 Summer 6's terms and conditions as detailed on its website summer6s.org.au

Signature Date
Parent / Guardian signature (if under 18)

Player 3 Name: DOB Age*

Address

Phone Email

I confirm that the above information is correct and agree to the 2017 Summer 6's terms and conditions as detailed on its website summer6s.org.au

Signature Date
Parent / Guardian signature (if under 18)

Player 4 Name: DOB Age*

Address

Phone Email

I confirm that the above information is correct and agree to the 2017 Summer 6's terms and conditions as detailed on its website summer6s.org.au

Signature Date
Parent / Guardian signature (if under 18)

Player 5 Name: DOB Age*

Address

Phone Email

I confirm that the above information is correct and agree to the 2017 Summer 6's terms and conditions as detailed on its website summer6s.org.au

Signature Date
Parent / Guardian signature (if under 18)

Player 6 Name: DOB Age*

Address

Phone Email

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Signature Date
Parent / Guardian signature (if under 18)

Player 7 Name: DOB Age*

Address

Phone Email

I confirm that the above information is correct and agree to the 2017 Summer 6's terms and conditions as detailed on its website summer6s.org.au

Signature Date

Parent / Guardian signature (if under 18)

Player 8 Name: DOB Age*

Address

Phone Email

I confirm that the above information is correct and agree to the 2017 Summer 6's terms and conditions as detailed on its website summer6s.org.au

Signature Date

Parent / Guardian signature (if under 18)

Player 9 Name: DOB Age*

Address

Phone Email

I confirm that the above information is correct and agree to the 2017 Summer 6's terms and conditions as detailed on its website summer6s.org.au

Signature Date

Parent / Guardian signature (if under 18)



Player 10 Name: DOB Age*

Address

Phone Email

I confirm that the above information is correct and agree to the 2017 Summer 6's terms and conditions as detailed on its website summer6s.org.au

Signature Date

Parent / Guardian signature (if under 18)

Player 11 Name: DOB Age*

Address

Phone Email

I confirm that the above information is correct and agree to the 2017 Summer 6's terms and conditions as detailed on its website summer6s.org.au

Signature Date

Parent / Guardian signature (if under 18)

Player 12 Name: DOB Age*

Address

Phone Email

I confirm that the above information is correct and agree to the 2017 Summer 6's terms and conditions as detailed on its website summer6s.org.au

Signature Date

Parent / Guardian signature (if under 18)
