





## JUNIOR STATE CHAMPIONSHIPS Team Nomination Form

\*\*\*Conditions of Nominating a Team\*\*\*

The second page is to be completed in full and submitted by the team manager to the INFQ Member Centre. This form is not to be accepted by the INFQ Member Centre unless payment of \$550 has been made in full to the centre.

## GRADES

10's & Under

12's & Under

- 14 & Under Girls
- 16 & Under Mixed

Saturday, Sunday, Monday & Tuesday 18<sup>th</sup> September to 21<sup>st</sup> September

(4 Days)

**Ipswich Indoor Sports Centre** 

## GRADES

8's & Under 14's & Under Girls 16 & Under Mixed

Wednesday 22<sup>nd</sup> September &

Thursday 23<sup>rd</sup> September

(2 Days)

**Ipswich Indoor Sports Centre** 

Please return this form along with your \$550 payment on or before	
INDOOR	Monday 16 <sup>th</sup> August 2021
RETBALL Queensland	TO ANY INFQ MEMBER CENTRE
Age Grad	le: Girls or Mixed
Team Name:	
INFQ Member Centre:	
TEAM MANAGERS INFORMATION:	
Christian Na	me: Surname:
	(PLEASE PRINT CLEARLY)
Mobile:	Alt Phone:
E-mail:	
MANAGER & CENTRE CHECK LIST	
<ul> <li>Paid \$550 to Indoor Sports Centre – (Nominations Will Not Be Accepted Without Payment)</li> </ul>	
<ul> <li>Filled in all information above (No Blank Spaces Please)</li> </ul>	
INFQ Centre have confirmed with manager the <u>correct dates</u> for the nominating team grade?	
Tournament Checklist:	
<ul> <li>Manager i</li> </ul>	nust attend "Managers Meeting" at the required time - (will be on the front page of the draw)
<ul> <li>At the managers meeting the "Team Sheet" must be handed in - completed in full (including signatures)</li> </ul>	
<ul> <li>Manager <u>MUST</u> always have photo ID for every player readily available and must be produced if asked.</li> </ul>	
<ul> <li>Photo ID for all 12's, 14's &amp; 16's, (Student ID is preferred)</li> </ul>	
<ul> <li>Birth Certificate / Passport for 8's &amp; 10's is acceptable.</li> </ul>	
<ul> <li>If ID cannot be produced, then player will take no further part in tournament until ID is presented</li> </ul>	
<ul> <li>to the Tournament Director.</li> <li>The "Standing for State" form will be replaced by a "Google Docs" link – parents/guardian to complete.</li> </ul>	
<ul> <li>The "Standing for State" form will be replaced by a "Google Docs" link – parents/guardian to complete.</li> <li>Must be made aware of INFQ Media Policy (including Parents) INFQ website – www.infq.com.au</li> </ul>	
MANAGER'S SIGNATURE: (to confirm all information has been discussed with INFQ Centre and all monies paid)	
DATE:	
	INFQ Member Centre ONLY:
INDOOR	Date Nom Form & Money received:
RETBALL Que onstand	Team Entered into Google Doc:
	Name of Centre Staff Member: