Indoor Hockey

Team Nomination Form
2016 Season

Please return to CHA Office or Email to info@cairnshockey.com.au

Team Name:_____ (subject to approval)

Division: Please mark with X

Tuesday (Senior Competitive)	Thursday (Senior Social)	Friday (Secondary School Age)
☐	☐	☐

Team Shirt Colours: _____

Team Coordinator:

Name:_____ Home Phone: _____

Work Phone: _____ Mobile: _____

Email address: _____

Game Fees: Senior $60 per team per game Secondary $50 per team per game

Players must register on the data base to play indoor even if they have played the 2016 outdoor winter season.
https://memberdesq.onesporttechnology.com/1798/reg/portal

Team Members:

Name	Contact No.	Date of Birth