**Form C9**

*(Updated 17 January 2022)*

# meteastlogo

# Metropolitan East School Sport

**NOMINATION OF DISTRICT TEAM TO ATTEND REGIONAL TRIAL**

(to be completed by **District Secretary)**

|  |  |
| --- | --- |
| **SPORT:** |  |
| **DISTRICT:** |  |

|  |
| --- |
| **TEAM 1** |
| Age: |  |
| Gender: |  | Select from Boys, Girls, Combined |
| Manager: |  | Coach: |  |
| School: |  | School: |  |
| Phone: |  | Phone: |  |
| Mobile: |  | Mobile: |  |
| Email: |  | Email: |  |

|  |
| --- |
| **TEAM 2** |
| Age: |  |
| Gender: |  | Select from Boys, Girls, Combined |
| Manager: |  | Coach: |  |
| School: |  | School: |  |
| Phone: |  | Phone: |  |
| Mobile: |  | Mobile: |  |
| Email: |  | Email: |  |

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| --- |
| **TEAM 3** |
| Age: |  |
| Gender: |  | Select from Boys, Girls, Combined |
| Manager: |  | Coach: |  |
| School: |  | School: |  |
| Phone: |  | Phone: |  |
| Mobile: |  | Mobile: |  |
| Email: |  | Email: |  |

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| --- |
| **TEAM 4** |
| Age: |  |
| Gender: |  | Select from Boys, Girls, Combined |
| Manager: |  | Coach: |  |
| School: |  | School: |  |
| Phone: |  | Phone: |  |
| Mobile: |  | Mobile: |  |
| Email: |  | Email: |  |

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| --- | --- | --- |
| PLEASE RETURN TO THE CONVENOR WHOSE CONTACT DETAILS ARE AT RIGHT: | Name |  |
| Phone |  |
| Email |  |
| NOMINATIONS CLOSE AT 5:00pm ON |  |