**U19 NATIONAL CLUBS CHAMPIONSHIP**

**ENTRY FORM**
TEAM NAME:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|   | **Name**  | **Email address**  | **Mobile Number**  | **Date of Birth** | **Affiliation No.**  |
| **Team Manager**  |  |  |  |  |  |
| **Coach** |  |  |  |  |  |
| **Umpire**    |  |  |  |  |  |

**CLOSING DATE FOR ENTRY FORM, PAYMENT & TEAM LIST FRIDAY 17TH JUNE**

Please fill out 1 entry form per team.

Where entry numbers are limited places will be allocated on a first come first served basis.

If teams are struggling to source an umpire, please contact myself I will try and help – **Teams are responsible for contacting and securing an umpire**

**ENTRY FEE**

ENTRY FEE £75 PER TEAM.

Please note preferred payment is bank transfer

Please reference the payment as: “Club Name – G1200 – U19”

Bank Details: The Welsh Netball Association, Ltd

Account: 87954621

Sort: 516140

Cheque Details: The Welsh Netball Association

Sport Wales National Centre

Sophia Close

Cardiff

CF11 9SW

PLEASE NOTE ENTRY FEES ARE NON-REFUNDABLE.