

NDWHA Indoor Player Nomination Form

(All sections must be filled in to be valid)

Name: _		D.O.B	
Address: _			
-			
Age Group Nominating: 13s, 15s, 18s, Open, Masters			
Playing Position	ı: 1st choice	2nd Choice	
Contact Details:			
Phone: _	(home)		(mobile)
E-mail: _			
Payment Metho	od of Representative Levy of \$13	5: DIRECT DEPOSIT /	CHEQUE
Name of A	oosit details are: Account: Newcastle District Won ch: Newcastle West	nen's Hockey Association	n Inc.

YOU MUST ATTACH IN EMAIL OR POSTAL FORM THE PRINT OUT RECEIPT OF DIRECT DEPOSIT PAYMENTS FOR YOUR NOMINATION TO BE VALID AND ACCEPTED.

Please email your nomination to: ndwha@newcastlehockey.com.au

BSB: 012-780

Account Number: 2065-88567