



# BALLINA SOCCER CLUB INC

[www.ballinasoccer.com.au](http://www.ballinasoccer.com.au)

[secretary@ballinasoccer.com.au](mailto:secretary@ballinasoccer.com.au)

PO Box 732, Ballina NSW 2478

## BALLINA JUNIOR CARNIVAL

### SUNDAY 15<sup>th</sup> MAY 2016

## NOMINATION FORM - Due TUESDAY 10<sup>th</sup> MAY

The ..... Club wishes to nominate the following teams:

| Grade | Team Name | No of Players | Contact Name | Mobile | Email |
|-------|-----------|---------------|--------------|--------|-------|
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Below is the credit card details or enclosed is a cheque / receipt of an electronic funds transfer into your account of \$..... for the nominations of our teams for the Ballina junior carnival.  
(\$45 p/team grade 5/6, 7's; \$50 p/team grade 8,9,10 &11's)

**Credit Card Payment:**

Name on card:..... Type: Visa, Master Other:.....

Card No:..... Expiry Date:.....

**Electronic Funds Transfer:** BSB: 637 000 Account No: 780392460 Please use club name as a reference.

**Snail Mail:** Ballina Soccer Club, PO Box 732, Ballina NSW 2478. This form can be posted with a cheque or email to [treasurer@ballinasoccer.com.au](mailto:treasurer@ballinasoccer.com.au) with credit card details or an EFT receipt.

### **Nomination Forms to be submitted no later than Tuesday 10<sup>th</sup> May 2016**

(Team Lists will be accepted up until Friday 13<sup>th</sup> May 2016)