

# TEAM NOMINATION ENTRY FORM

## LILYDALE & DISTRICT NIGHT TENNIS ASSOCIATION

Present Tennis Club:.....

Category applying for: (Cross in box)

Ladies ☐ Monday    Mens ☐ Tuesday    Mixed ☐ Wednesday    Open ☐ Thursday

Preferred Team Name:.....

Section applying for:.....

If the same team as previous season give team name and section

Team Name:.....

Section:.....

**REGISTRATION FEE OF \$30 MUST ACCOMPANY THIS ENTRY FORM**

Teams must be prepared to play on an alternative night

**PLEASE COMPLETE ALL DETAILS ACCURATELY  
(NO TICKS OR DASHES)**

Grade previously played

Eastern Region

Saturday

Mid Week

VTA

Night Comp

Other

Surname	Christian Name	Phone No	Senior	Junior	Mid Week	VTA	Night Comp	Other
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### MEN


### WOMEN


### EMERGENCIES


Captain's Details:

Name:.....

Address:.....

.....Postcode:.....

Telephone:.....

Email:.....

Closing date:...../...../.....

**This Team Nomination Entry Form must be returned to your Club Representative**

Teams not associated with a L&DNTA member club.  
Should return their Team Nomination Entry Form to:

Secretary. Mr. Steve Baldry  
1 Lanier Crescent, North Croydon 3136