



Join in the Fun!



Tasmanian Water Polo Inc.  
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# TEAM REGISTRATION FORM

*This form must be emailed to universitywp@gmail.com by Friday 21February 2013. A coaches and managers meeting is scheduled for WednesdayFebruary 26, 7.30PM, at the Clarence Pool.*

## TEAM INFORMATION

School Name:.....

Grade:.....(Teams can be mixed gender).

## PLAYER NAMES

- 1).....
- 2).....
- 3).....
- 4).....
- 5).....
- 6).....
- 7).....
- 8).....
- 9).....
- 10).....
- 11).....
- 12).....
- 13).....

## COACH INFORMATION

Full Name:.....

Home Phone:..... Mobile:.....

Email Address:.....

## TEAM MANAGER INFORMATION

Full Name:.....

Home Phone:..... Mobile:.....

Email Address:.....

SUPPORTED BY



MAJOR SPONSOR



SOUTHERN VENUE



<b>OFFICE USE ONLY</b> Date Received: ...../...../..... <input type="checkbox"/> Team Information Entered
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