

NOMINATION FORM FOR LAQ REGIONAL RELAYS

Centre: NAMBOUR

Nominations must be lodged through your Centres.

REFER TO CENTRE COMMITTEE FOR NOMINATIONS CLOSING DATES & MAXIMUM NUMBER OF ENTRIES

Shaded boxes indicate events which ARE NOT available to that age group

| EVENTS | U7 | U8 | U9 | U 10 | U11 | U12 | U13 | U14 | U15 | U17 |
|-----------------|----|----|----|------|-----|-----|-----|-----|-----|-----|
| Sprints 4 x 70m | | | | | | | | | | |
| 4 x 100m | | | | | | | | | | |
| 4 x 200m | | | | | | | | | | |
| 4 x Medley | | | | | | | | | | |
| Long Jump | | | | | | | | | | |
| High Jump | | | | | | | | | | |
| Discus | | | | | | | | | | |
| Shot Put | | | | | | | | | | |

MAXIMUM of 5 events per child. Nomination Fee is \$2.50 per athlete per event (GST Incl)

Surname _____ Contact ph/email: _____

First Name _____ B/G U/ Rego No. _____ No Events _____ Fees \$ _____

First Name _____ B/G U/ Rego No. _____ No Events _____ Fees \$ _____

First Name _____ B/G U/ Rego No. _____ No Events _____ Fees \$ _____

Centre use only Receipt No: _____ Amount received: _____



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