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 **EVENTS** U7 U8 119 U 10 U11 U12 U13 U14 U15 U17 4 x 70m Sprints available to that age group 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: Rego No._____ No Events____ Fees \$_____ First Name_____B/G U/ Rego No._____No Events_____Fees \$_____ First Name_____ B/G U/ B/G Rego No._____No Events_____Fees \$_____ U/ First Name Centre use only Receipt No:_____ Amount received: 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 **EVENTS** U7 U8 U9 U 10 U11 U12 U13 U14 U15 U17 Sprints 4 x 70m available to that age group 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) Contact ph/email: Surname Rego No._____No Events____ Fees \$_____ First Name_____B/G U/ Rego No. No Events Fees \$ First Name B/G U/

_____B/G Receipt No:_____

First Name

Centre use only

U/

Amount received:

Rego No._____No Events_____Fees \$_____