

2026 ADELAIDE L'ACES MASTERS INVITATIONAL TEAM REGISTRATION FORM

CLUB/TEAM NAME				
CONTACT NAME				
CONTACT PHONE				
CONTACT EMAIL				
I acknowledge that I am responsible for informing all players within my team the competition details and rules.		SIGNED / DATE		
	PLAYER NAME	PERMIT	DATE OF BIRTH	PAID
1				
2				
3				
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13				
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16				
17				
18				
Umpire			Ph:	xxx

*** Permit players must be recorded*

Payment methods: cash or direct deposit.

\$225.00 per team entry to cover the first 9 players. Additional \$25.00 per player

Account name: Adelaide Aces BSB: 805 050 Account number: 102 353 745