



## 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 |
| 1   |             |               |               |
| 2   |             |               |               |
| 3   |             |               |               |
| 4   |             |               |               |
| 5   |             |               |               |
| 6   |             |               |               |
| 7   |             |               |               |
| 8   |             |               |               |
| 9   |             |               |               |
| 10  |             |               |               |
| 11  |             |               |               |
| 12  |             |               |               |
| 13  |             |               |               |
| 14  |             |               |               |
| 15  |             |               |               |
| 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