

SOUTH AUSTRALIAN WOMEN'S CRICKET ASSOCIATION

REGISTRATION OF PLAYER

SEASON 2002 / 2003

Register as a player for _____ Cricket Club

in accordance with the Rules and By-Laws of the South Australian Women's Cricket Association and I agree to abide by those Rules and By-Laws.

PLEASE USE BLOCK LETTERS

Name _____

Address _____

_____ Post Code _____

Telephone Numbers

Home _____ Work _____

Mobile _____

Date of Birth _____

How many years have you played cricket: _____

Occupation/School _____

Signature of Player _____

Club Secretary _____ Date _____

Complete in triplicate and return to:
Match Results Coordinator
South Australian Women's Cricket Association

