



## 2021/22 Qld State Indoor Championships

Player/Coach/Manager/Umpire/Tech Nomination Form (circle)

Name \_\_\_\_\_

Age Group \_\_\_\_\_ Date of birth \_\_\_\_\_

Email \_\_\_\_\_

Mobile \_\_\_\_\_

\_\_\_\_\_ Parent/Guardian Emergency details(for those aged under 18 only)

name \_\_\_\_\_

mobile \_\_\_\_\_

email address \_\_\_\_\_

Please complete form and email to [info@scih.org.au](mailto:info@scih.org.au)