

# REGISTRATION FORM - 2010.

**Kick Fit**  
play. enjoy. stress less.

Send your completed form to [sblackah@healthbydesign.com.au](mailto:sblackah@healthbydesign.com.au)

## Team details:

Team name: \_\_\_\_\_

Players names:

1. Captain \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

*Please note: All players are entering this competition at their own risk and no responsibility will be taken for any injuries incurred during the competition.*

## Company details (all fields mandatory):

Company name: \_\_\_\_\_

Contact person: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

HR, HSE or Marketing/Events Manager: \_\_\_\_\_

E-mail: \_\_\_\_\_

Entry fee: \$110.00    Social Function: \$35 per person.    Number of tickets required: \_\_\_\_\_

Total: \$ \_\_\_\_\_ (plus GST)

*Payment method: An invoice and player pack will be sent to you once registration has closed.*

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