



**Greater Brisbane Junior Tennis Association Inc.**

PO Box 630 Indooroopilly Queensland 4068

www.gbjt.org.au

Contact: Mrs Peta Davis 07 3374 0516 or admin@gbjt.org.au

## **2008 SEASON 1 – FIXTURE NOMINATION FORM AND AGREEMENT FOR RETURNING PLAYERS**

**SEASON DATES: 23 February 2008 to 14 June 2008**  
**Only nominate if you are available for the whole season**

**In Season 1, 2008 each player receives a Head Tennis Cap as part of their  
Nomination fee.**

**PLEASE MAIL OR EMAIL THE FORM AND FEES TO GBJT BY 8 FEBRUARY  
2008**

**The following information is compulsory**

<b>Player's Full Name:</b>	<input type="checkbox"/> M <input type="checkbox"/> F
<b>Player's Date of Birth:</b>	
<b>Full Address:</b>	
<b>Hone Telephone Number:</b>	
<b>Mobile Number:</b>	
<b>Email Address (please ensure this address is able to be used for emailing instructions, team draws, newsletters):</b>	
<b>School:</b>	
<b>Coach:</b>	
<b>Special Instructions (please advise of any special instructions you have which will help with your child's tennis):</b>	



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### FEES PAYABLE

The nomination fee for GBJT fixtures for Season 1, 2008 is as follows:

GBJT Nomination Fee	<b>\$120</b>
Compulsory Tennis Queensland Registration Fee (if not already paid to TQ for 2008)	<b><u>\$27</u></b>
<b>TOTAL PAYABLE</b>	<b><u>\$147</u></b>

(Discount of \$10 for each subsequent family member)

#### PAYMENT DETAILS

- |  |   |
|--|---|
| <input type="checkbox"/> Cheque or Money Order<br>(Payable to GBJT Inc.) | <input type="checkbox"/> EFT Payment: Account Name – GBJT Inc.<br>BSB- 124 103 Account No. – 1061 7208<br>Bank – Bank of Queensland. (Please<br>include name of player in the reference). |
|--|---|

### NOMINATION CONDITIONS

In completing and signing this nomination form you agree to abide by the following conditions:

1. Fees are required to be paid at time of Nomination.
2. In nominating to play GBJT fixtures, you have made a commitment to be available to play the majority of the season for the team you have been selected in.
3. In signing this form you agree to abide by the rules of GBJT / Tennis Queensland as contained on the GBJT website.
4. Parents agree to do 'Parent on Roster' duties (normally only once or twice a season) which are displayed on the GBJT website.
5. That my personal details may be supplied to fixture associations and Tennis Queensland as required and to provide me with information about tennis and related activities. My name and contact details will also be provided on team lists supplied to other club members. Photo's of players / parents may also be displayed on our website / newsletters.

#### IMPORTANT NOTICE – PARENTS / CARERS

- In signing this form you agree to abide by the **Nomination Conditions** as outlined above.
- ARE YOU AVAILABLE TO BE A FIXTURE PLAYER REPLACEMENT CONTACT FOR YOUR CHILDS LEVEL?  
YES / NO
- ARE YOU AVAILABLE TO BE A LEVEL CO-ORDINATOR FOR YOUR CHILDS LEVEL?  
YES / NO

**PARENT / CARERS NAME:** \_\_\_\_\_

**PARENT / CARERS SIGNATURE:** \_\_\_\_\_