



# IPSWICH KNIGHTS SOCCER CLUB



## 2011 SSF Carnival Registration Form

Name of Club: \_\_\_\_\_

Team Name: \_\_\_\_\_

No. of Players in your Team: \_\_\_\_\_

SSF Age Group:                      U 6                      U 7                      U 8                      U 9                      U 10                      U 11

Team Leader:

Contact Name: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

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

**Payment Method:** *Please circle the applicable method*

**Cheque**

**Money Order**

**Direct Deposit**

**Cash**

**BSB:** 064 444, **Account No.:** 1029 1856, **Account Name:** Ipswich Knights SC, **Reference:** "Club Name - Team Name"

**Total Amount Payable (Number Registered Players x \$10):**    \$ \_\_\_\_\_

**Please read and sign form below.**

- We agree to abide by the Carnival rules and regulations and will advise my team and provide all parents with a copy of them.

Please send registration form and payment (if cheque or money order) to:

Ipswich Knights Soccer Club  
The Secretary  
PO Box 499  
Booval, Qld, 4304

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Please note:**

- All nominations will be notified by SMS of your success to enter the carnival soon after nominations close on 24 July 2011 and we receive your nomination entry form and entry fee.
- Copy of draw, time guidelines for the day will follow or will be available at the registration table on the morning of the carnival.

*THE IPSWICH KNIGHTS THANKS OUR SPONSORS FOR THEIR SUPPORT*

