



# CRICKET VICTORIA



## FREE GROUP ADMISSION FORM 2008/09

Please complete all details to ensure a prompt response

<b>NAME OF SCHOOL/CLUB:</b>			
<b>ADDRESS:</b>			<b>POSTCODE:</b>
<b>TELEPHONE:</b>	( )	<b>Email:</b>	
<b>DATE OF ATTENDANCE:</b>			
<b>SCHEDULED MATCH:</b>			
<b>NUMBER OF PARTICIPANTS ATTENDING:</b>		<b>NUMBER OF SUPERVISORS ATTENDING:</b>	
<b>NAME OF SUPERVISOR IN CHARGE:</b>			

A confirmation letter will be forwarded to you with entry details upon receipt of this application.

Please note this application should be submitted at least TEN (10) working days prior to the match date.



**Please return this form to:**  
**Gabriella Mallett**  
**Cricket Victoria**  
**86 Jolimont Street Jolimont VIC 3002**  
**or Fax: (03) 9653 1178**  
**Any queries please phone (03) 9653 1122**

