

PLAYER REGISTRATION FORM

Club Name _____

Please supply the names and Club Membership numbers of your team members below.
This is a Clubs NZ requirement.

	Player Name – Please print clearly	Membership No.
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		

I hereby certify that the above are Members of this Clubs NZ Club

_____ Secretary / Manager

Pool player required for Triples? Yes / No (Confirm at registration)

Pool player/s required for Fours? Yes / No (Confirm at registration)

Name/s of registered players available for pool (Confirm at registration)
