

EDWTA EMERGENCY POOL PLAYER REGISTRATION FORM

www.tennis.com.au/edwta

NAME _____

ADDRESS _____

PHONE NUMBER/S _____

EMAIL _____

MATCH CENTRE NUMBER _____

SEASON/s AVAILABLE _____

KNOWN DATES WHEN NOT AVAILABLE TO PLAY _____

GRADE: Give details of previous competition played, Association, day, grade and position in team _____

I agree to allow my name and contact details to appear on the EDWTA Emergency Pool List for SEASON _____

This list will be sent to all Captains of EDWTA teams and may be posted on the EDWTA website.

Signed _____

Email completed form to: jenny@gorog.org

Contact: Jenny Gorog mobile: 0411 647 720

UPDATED: AUGUST 2023