

## 2011 / 2012 Alcohol. Think Again WA Beach Volleyball Tour Nomination Form



**Have you missed any State Tour events due to National / International playing commitments?**

If so, when? \_\_\_\_\_

**EVENT YOU ARE ENTERING (Please circle the correct one)**

|                   |                   |                      |                      |             |             |
|-------------------|-------------------|----------------------|----------------------|-------------|-------------|
| <u>WA Juniors</u> | <u>WA Masters</u> | <u>SS#1</u>          | <u>SS#2</u>          | <u>SS#3</u> | <u>SS#4</u> |
| <u>SS#5</u>       | <u>SS#6</u>       | <u>WA State Open</u> | <u>Mixed Doubles</u> |             |             |
| <b>GENDER</b>     | Male              | Female               | <b>DIVISION</b>      | U17s        | Masters     |

**NAMES OF ATHLETES: (All Athletes must be members of Volleyball WA)  
PLEASE COMPLETE THE FORM IN BLOCK LETTERS**

1. Name:..... VWA Member   
 Telephone: Hm:.....Mobile:.....Wk:.....  
 Email: .....

2. Name:..... VWA Member   
 Telephone: Hm:.....Mobile:.....Wk:.....  
 Email: .....

**ENTRY FEES PER TEAM:**

|                            |       |                       |       |                         |       |
|----------------------------|-------|-----------------------|-------|-------------------------|-------|
| Royal Park Open            | \$ 60 | WA Juniors/WA Masters | \$ 60 | State Series All Grades | \$ 60 |
| State Series Juniors (U17) | \$ 50 | Open 4 a-side         | \$ 80 | Mixed Doubles           | \$ 60 |
| State Open All Teams       | \$ 70 | State Open Jnr Teams  | \$ 60 |                         |       |

**Upfront Payment PER PLAYER \$220 Juniors (U/17) \$190**

**YOU MUST STILL REGISTER FOR EACH TOURNAMENT**

Upfront payment includes Royal Park, State Series Events and WA State Open (not specialty events)

**PAY BY:** Cheque  Cash  Credit Card  Season Payment

Amount Enclosed: \$ ..... Visa  Mastercard  (Credit card incurs 4% bank fee )

Card Name: .....

Card Number: ...../...../...../..... Expiry Date: ..... /.....

Signature: .....

**Direct Debit:** Volleyball WA Commonwealth Bank BSB: 066106 A/C #: 902237

***IF YOU PULL OUT AFTER NOMINATIONS HAVE CLOSED - YOU WILL FORFEIT YOUR  
NOMINATION FEE***

Entries must be submitted with payment to be accepted. Check Handbook or website for Nomination Closing Dates. Please note early closing times for SS # 3.

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# PLAYER PROFILE

(PLEASE COMPLETE CLEARLY)



Name \_\_\_\_\_

Nicknames \_\_\_\_\_

Occupation \_\_\_\_\_

DOB \_\_\_\_\_ Height \_\_\_\_\_

Partner \_\_\_\_\_

No Of Years Together (Playing) \_\_\_\_\_

Greatest Team Achievement \_\_\_\_\_  
\_\_\_\_\_

Best/Worst Thing About Playing Beach Volleyball  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What Is The Scariest Thing You Have Ever Done?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Favourite Movie? \_\_\_\_\_

What Is Your Most Annoying Habit? \_\_\_\_\_  
\_\_\_\_\_

All Time Best Song To Karaoke To? \_\_\_\_\_

Most Embarrassing Moment? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What Do You Eat For Breakfast? \_\_\_\_\_  
\_\_\_\_\_

If You Could Do One Thing Before You Died, What Would That Be?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If You Could Meet Anyone In The World, Dead Or Alive, Who Would That Be?  
\_\_\_\_\_

