

**JUNIOR TEAMS NOMINATION FORM
Summer League 2010/2011**
CLUB: _____

GROUND LOCATIONS:
MAIN GROUND: _____ **PLAYING LEVEL:** _____

ADDRESS: _____

MELWAYS REF: _____ **PH:** _____

ALTERNATE GROUND: _____ **PLAYING LEVEL:** _____

ADDRESS: _____

MELWAYS REF: _____ **PH:** _____

DIAMONDS AVAILABLE:

 Junior Use
DIAMOND COMBINATIONS: _____

SUNDAY STATE/METRO COMPETITION
NUMBER OF TEAMS:
2009/2010 **2010/2011** **Expected Gradings**

Little League		Little League		
Under 14		Under 14		
Under 16		Under 16		
Under 18		Under 18		

FRIDAY NIGHT CENTRES COMPETITION
NUMBER OF TEAMS
2009/2010 **2010/2011** **Team Names**

Little League		Little League		
Under 14		Under 14		

CLUB DOMESTIC COMPETITION
NUMBER OF TEAMS
2009/2010 **2010/2011**

Little League		Little League	
Under 14		Under 14	
Under 16		Under 16	

Please list any special requirements which you would like considered in relation to any of the above teams when fixturing. _____

Application made on behalf of: _____

Signed: _____ Date: _____

**PLEASE COMPLETE AND RETURN TO THE BASEBALL VICTORIA OFFICE
NO LATER THAN 9th August 2010
christine.little@baseballvictoria.com.au or fax (03) 9645 8200
(Late entries accepted at the discretion of the Pennant Committee).**