

CENTRE USE ONLY | NOMINATION FORM FOR LAQ COMBINED EVENT CHAMPIONSHIPS

This nomination form may be copied for nominating purposes and returning to your affiliated Centre. Check with your Centre Committee for the closing date.

By completing this form, the member(s) acknowledge and understand LAQ rule; any U9 - U17 athlete failing to start or make a trial, in any of the events of the Combined Event shall not be allowed to take part in the remaining events, and shall be considered to have abandoned the competition. Therefore, that athlete shall not figure in the final placings.

Nomination fees: \$20 per athlete													
Shaded boxes indicate events which ARE NOT available to that age group	COMBINED EVENT	MC	U7s	U8s	U9s	U10s	U11s	U12s	U13s	U14s	U15s	U16s	U17s
	Triathlon												
	Tetrathlon												
	Pentathlon												
	Heptathlon												
	Track Triathlon												
	Jump Triathlon												
	Throws Triathlon												

Surname _____ Contact ph/email: _____

First Name _____ B/G U/ _____ DoB. _____ Rego No. _____ Fees \$ _____

First Name _____ B/G U/ _____ DoB. _____ Rego No. _____ Fees \$ _____

First Name _____ B/G U/ _____ DoB. _____ Rego No. _____ Fees \$ _____

Parent / Guardian: (name) _____ Total Fees \$ _____

Centre use only Receipt No: _____ Amount received: _____



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