

**CENTRE USE ONLY | NOMINATION FORM FOR LAQ REGIONAL RELAYS**

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

Dark shaded boxes indicate events which <b>ARE NOT</b> available to that age group as a team event Light shades boxes (U7 & U8s) Please check if offered by Region	Nomination fees: \$3.50 per event												
	EVENTS	U7s	U8s	U9s	U10s	U11s	U12s	U13s	U14s	U15s	U16s	U17s	
	4 x 70m												
	4 x 100m												
	4 x 200m												
	4 x Swedish												
	4 x Medley												
	Long Jump												
	High Jump												
	Discus												
Shot Put													

Surname \_\_\_\_\_ Contact ph/email: \_\_\_\_\_

First Name \_\_\_\_\_ B/G U/ \_\_\_\_\_ Rego No. \_\_\_\_\_ No Events \_\_\_\_\_ Fees \$ \_\_\_\_\_

First Name \_\_\_\_\_ B/G U/ \_\_\_\_\_ Rego No. \_\_\_\_\_ No Events \_\_\_\_\_ Fees \$ \_\_\_\_\_

Centre use only Receipt No: \_\_\_\_\_ Amount received: \_\_\_\_\_



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