## **Application for Side Registration for season 2024/25**

Please complete this form and return to

Secretary Southern Districts Electric Light Bowls Association Inc.(SDELBA)

bob.backstar06@gmail.com or 87/100 Station St Burwood 3125

With payment of \$130 for each side-by Friday 6th September 2024

Club Na	ıme	• • • • • • • • • • • • • • • • • • • •	•••••	•••••	•••••	
	behalf of the above					
Name prin	ted		Signature			
			Date			
We wish	to enter side	/sides.				
_	ne ground addre		•••••			
	•••••					
•••••	•••••	•••••	••••••	• • • • • • • • • • • • • • • • • • • •	•••••	
We have.	Rinks under l	ights ( <u>Home</u>	Clubs only	<u>/</u> )		
<b>Club Dele</b> (Please <u>PRIN</u>	e <b>gates (2)</b> <u>T</u> clearly) name and te	lephone to appe	ear in fixture b	ook and o	on website.	
First Name	Surname	Address & Po	ostcode	Teleph	one (Home or Mobile)	
1						
EMAIL						
2						
EMAIL						
We under	stand that in makin	g this applicat	tion sides en	tered w	ill he fielded every wee	k of

We understand that in making this application sides entered will be fielded every week of the competition, and our sides and players, will at all times comply with the competition by-laws. We understand that failure to comply may incur a fine, or loss of premiership points, or both.

Please indicate any special considerations for your Club

**Direct Deposit to our Bendigo Bank:** SDELBA Inc BSB 633 000 Account 155 120959

Please add your **Club** name as reference to assist with issuing of receipts.

Or Cheques should be made payable to SDELBA

In order for this entry to be valid the form and payment must be received by