



Willowfest Team Registration Form

Please fill out all fields and send back to P.O. Box 2515, Mildura Victoria 3502.

Team Name: _____

Affiliated Club: _____

Contact Name: _____

Address: _____

Town / Suburb: _____ State: _____ Postcode: _____

Phone: _____

Mobile: _____

Fax: _____

Email: _____

<p>TOTAL REGISTRATION FEES</p> <p>MENS TEAM \$600</p> <p>WOMENS TEAM \$600</p>

Any Comments? _____
