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ECHUCA & DISTRICT NETBALL ASSOCIATION INC A000568P

ANNUAL TOURNAMENT 2014



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DATE: SUNDAY MAY 18TH

TEAM FEE: \$55.00

SECTIONS: 11/U 13/U 15/U 17/U Open as at (31/12/14)

VENUE: ECHUCA NETBALL COMPLEX – HIGH STREET, ECHUCA

ENTRIES DUE: WEDNESDAY APRIL 30th 2014

NO FAXED/EMAILED ENTRIES WILL BE ACCEPTED.

PAYMENT MUST BE RECEIVED WITH ENTRY.

ENQUIRIES: Netball Complex - Telephone: 5480 1725

P.O. Box, 559. Echuca, 3564. email: edna1@iinet.net.au

Office Hours Tue & Wed 9am - 5pm / Mon Thu Fri 9am - 3pm

CONDITIONS OF ENTRY/RULES OF PLAY:

1. All teams and umpires to report by 8.45am, Tournament commences 9.00am sharp.
2. All teams MUST SUPPLY ONE NON- PLAYING BADGED UMPIRE.
3. Players may only play for one team throughout the day.
4. To be eligible to play in Finals a player must have played at least once during the day with the team concerned.
5. Games shall consist of two seven minute halves. First named team takes centre pass.
In case of injury NO EXTRA TIME WILL BE PLAYED. Although umpires will allow for any injured player to be replaced.
6. All players and umpires must be currently registered with Netball Vic.
7. All matches to be played under Netball Victoria rules.
8. The Tournament will be held regardless of weather conditions.
9. Nine members of the winning and r/ up teams will receive trophies.
10. The Tournament Committee has the right to re-grade teams.
11. The Association will not be responsible for any injuries or lost property.
12. First Aid will be available only for injuries occurring on the day.
13. Canteen facilities will be available on the day Soup, Pies, Sandwiches, Drinks. A BBQ will also be available.
14. Winning team to take scoresheet ***immediately*** to tournament office.
15. **FINALS** – If scores are tied (i) there will a be a minute break any team changes /substitutions can be made. (ii) at the end of that 2x3 min halves are played with no substitutions/changes allowed. (iii) if scores are still tied play continues until one team has a two goal lead.

ECHUCA & DISTRICT NETBALL ASSOCIATION INC A0000568P
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ASSOCIATION.....
CONTACT.....
TELEPHONE.....EMAIL.....
UMPIRE..... BADGE.....

* NO FINALS

SECTION *11/U 13/U 15/U 17/U (please circle)

TEAM NAME

*****Submit an entry for every team entering.

T'ment Rego

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