



# Zone Athlete Nomination Form

23<sup>rd</sup> and 24<sup>th</sup> November 2019, Barden Park, Dubbo

|                     |  |                            |  |
|---------------------|--|----------------------------|--|
| <b>Athlete Name</b> |  | <b>Registration Number</b> |  |
| <b>Age Group</b>    |  | <b>Male / Female</b>       |  |

Please nominate events below:

Athletes in age groups 7-11 can choose 4 events.  
Athletes in age groups 12 and over can choose 6 events (excluding relays).

|          |  |
|----------|--|
| <b>1</b> |  |
| <b>2</b> |  |
| <b>3</b> |  |
| <b>4</b> |  |
| <b>5</b> |  |
| <b>6</b> |  |

### Important Information

**One Form per athlete  
Only under 7's and up can enter**

**Under 7's - DO NOT** progress past Zone

**Under 8's -**  
Who qualify at Zone do not progress past Region

**Ages 9 and up -**  
Who qualify at Zone progress to Region and can again qualify for State

**Region Carnival Date**  
1<sup>st</sup> and 2<sup>nd</sup> February 2020, Barden Park, Dubbo

**State Championships Date**  
State 14<sup>th</sup> and 15<sup>th</sup> March 2020, Sydney Olympic Park

*I wish to enter my child in the above events for Zone, I understand that by entering my child I am required to volunteer to help at Zone on behalf of DAC.*

|                 |           |           |
|-----------------|-----------|-----------|
|                 | <b>AM</b> | <b>PM</b> |
| <b>Saturday</b> |           |           |
| <b>Sunday</b>   |           |           |

Parent/  
Carer Name

\_\_\_\_\_

Signature

\_\_\_\_\_

Preferred Time to volunteer (*please tick*)

***This form must be returned by 29<sup>th</sup> October 2019***

**[dacregistrar74@gmail.com](mailto:dacregistrar74@gmail.com)**