



**Winter Australian
Corporate
Games.**

Replacement or Withdrawal

As a Replacement Entrant you must have read and understood the Entry Form information

▶	ORGANISATION	<input type="text"/>	
	SPORT	<input type="text"/>	
	EVENT & AGE CLASS	<input type="text"/>	
	TEAM NAME if applicable	<input type="text"/>	
▶	ENTRANT OUT	FIRST NAME	<input type="text"/>
		LAST NAME	<input type="text"/>

ENTRANT IN		ONLY to be completed if Replacing Entrant	
NAME	First Name	Last Name	
	<input type="text"/>	<input type="text"/>	
BIRTHDAY (Required)	Day	Month	Year
	<input type="text"/>	<input type="text"/>	<input type="text"/>
MAILING ADDRESS	Post Box or Street	DAY PHONE Code and Number	
	<input type="text"/>	<input type="text"/>	
Suburb or City	State/Territory	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Authorised by <input checked="" type="checkbox"/>	(to be one of the following)	Corporate Team Leader <input type="checkbox"/>	Team Captain <input type="checkbox"/>
		Withdrawn Entrant <input type="checkbox"/>	
Name _____		Contact # _____	
Signature _____		Date _____	



Return to Games via fax, post or bring to the Registration

Tel 1300 301 418
 Fax 1300 301 419
 Email WACG@corporategames.net.au
 Web corporategames.net.au
 Mail GPO BOX 5152 Sydney NSW 2001
 ABN 64 056 480 543

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Office use only		
Processed	Date	Signed _____
<input type="text"/>	<input type="text"/>	