



2019

Team Nomination Sheet

MUST be fully completed and exchanged
with opposing team manager as per
Condition 5, 15 minutes prior to hit-off.

Club:

Venue:

Versus:

Date:

TEAM ORDER

See 2019: RULE 9 - PLAYING IN ORDER OF ABILITY

Position	Player Name	Exact GA Hcp
1		
2		
3		
4		
5		
6		
7		
8		Not required
Manager		

Order of Play: 8 & 7, 6 & 5, 4 & 3, 2 & 1