

NOVA SCOTIA/NUNAVUT COMMAND

COMMAND DARTS REGISTRATION FORM

SINGLES



Zone Represented: _____

1st Branch Represented _____
Name No.

Player:

(1) _____
Name Phone no.

_____ Address Postal Code

_____ Membership Card No. Category

2nd Branch Represented _____
Name No.

Player:

(1) _____
Name Phone no.

_____ Address Postal Code

_____ Membership Card No. Category

Total Teams _____ Amount Enclosed \$ _____

Note: \$25.00 per player at Zone level. All money collected must be sent to the Darts Secretary/Treasurer no later than one week prior to date of the Shoot. **All cheques should be made payable to NS/NU Command Darts.**

Zone Commander or Zone Representative

Mail to: Kathy Julien
Secretary/Treasurer
31 Highfield Park Drive, apt 31
Dartmouth, NS B3A 4T3
(902) 478-8508