Phenomenon 2003 Entry Form

Team Name: _____

Player 1

Name: _____

Address: _____

_____

Phone: ( ) _____ (a/h)   Email: _____

Signature: _____

1	2	3	4	5	6	7	8	9

Player 2

Name: _____

Address: _____

_____

Phone: ( ) _____ (a/h)   Email: _____

Signature: _____

1	2	3	4	5	6	7	8	9

Player 3

Name: _____

Address: _____

_____

Phone: ( ) _____ (a/h)   Email: _____

Signature: _____

1	2	3	4	5	6	7	8	9

Player 4

Name: _____

Address: _____

_____

Phone: ( ) _____ (a/h)   Email: _____

Signature: _____

1	2	3	4	5	6	7	8	9

Player 5

Name: _____

Address: _____

_____

Phone: ( ) _____ (a/h)   Email: _____

Signature: _____

1	2	3	4	5	6	7	8	9

Player 6

Name: _____

Address: _____

_____

Phone: ( ) _____ (a/h)   Email: _____

Signature: _____

1	2	3	4	5	6	7	8	9

Session Availability: If a player is unavailable for a session, mark the grid under their address block with their unavailability.

Friday 6th June	Saturday 7th	Sunday 8th	Monday 9th
	9am-12pm Session 1	9am-12pm Session 5	9am-12pm Session 8
	1pm-4pm Session 2	1pm-4pm Session 6	1pm-4pm Session 9
6pm-7 pm Registration	4:30pm-7:30 pm Session 3	4:30pm-7:30pm Session 7	**Prizegiving**
Special Event: Diplomacy	8:30pm-11:30 pm Session 4	**Banquet at Zeffirelli's**	**Post-Con Drinkies at O'Neill's Pub**

If this entry form does not contain your full team, please attach a sheet with the names of the other team members. All teams will be filled with individual entrants UNLESS YOU TELL US!

Note: if we need to contact your team we will start with Player 1, then 2 etc, until we contact someone.

Cheques payable to Phenomenon Labs - PO Box 308, Belconnen, ACT, 2616