|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CLUB:** | | | | | | **season:** |  | |
| We hereby nominate the following teams to compete in the Lacrosse WA Competition. | | | | | | | |
| **junior** | | | **no. of teams** | | **team names if more than 1 team** | | |
| Women’s U17’s | |  | | |  | | |
| Women’s U14’s | |  | | |  | | |
| **senior** | **no. of teams** | | | **team names if more than 1 team** | | | |
| Women’s State League |  | | |  | | | |
| Women’s Division 2 |  | | |  | | | |

PLEASE NOTE:

* LWA3.1 - Women’s Team Nomination Form due prior to the 1st of March.
* Clubs are responsible for allocating appropriate officials to fixtured games. The number of weekly allocations will be determined by the Director of Women’s Lacrosse & Officiating based on total team numbers and games to be played.