



### WITS INTERNAL NETBALL LEAGUE TEAM REGISTRATION FORM

Wits Sports

Sports Officer: Tebogo Rabothata

tebogo.rabothata@wits.ac.za

West Campus,

Contact person: Dineo Modisakeng

[modisakengdineo@gmail.com](mailto:modisakengdineo@gmail.com)

Sturrock Park

Residence/ Faculty/ Team Name: \_\_\_\_\_

Team Manager/captain/contact person: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Email: \_\_\_\_\_

No.	Player name & Surname	Student (ID) Number	E-mail Address	Contact Number
1.	( c )			
2.				
3.				
4.				
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11.				
12.				
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Team Manager (contact person) Name: \_\_\_\_\_

Team Manager (contact person) signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Banking details**

University of Witwatersrand  
First National Bank  
Braamfontein 251905  
account number  
62077141580

**Reference – WINL & Team Name**

**# Wits against Gender Base Violence**