## **NOVA SCOTIA/NUNAVUT COMMAND**

## **COMMAND DARTS REGISTRATION FORM**

## **DOUBLES**



Zone Represented:	
404 5 4 5	
1st Branch Represented	No.
Name	
Players:(1)	Phone no.
Tid.III	Thene he.
Address	Postal Code
Membership Card No.	Category
(2)	
Name	Phone no.
<del> </del>	
Membership Card No.	Category
2 <sup>nd</sup> Branch Represented	
Name	No.
Players:(1)	
Name	Phone no.
Address	Postal Code
Address	Postal Code
Membership Card No.	Category
·	5 200 9 2 7
(2)	
Name	Phone no.
Membership Card No.	Category
Membership Card No.	Category
Total Teams	Amount Enclosed \$
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
Note: \$40.00 per team 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	
Socrotary/Troacuror	

Secretary/Treasurer 31 Highfield Park Drive, apt 31 B3A 4T3 Dartmouth, NS

(902) 478-8508