



## **MISS CROATIA ENTRY**

**Participants Name and Club:**

**Date of Birth**

**Address:**

**State:**

**P/Code:**

**Ph:**

**Mobile:**

**Email:**

**If participant is under 18 years of age who will be the guardian of the participant during the tournament:**

**Parent/Guardian Name:**

**Contact Number:**

**\*Parent Guardian Signature:**

**\* approving participant's involvement at 2011 Miss Croatia Australia**

**Email to [csfanz@gmail.com](mailto:csfanz@gmail.com) or mail to Croatian Soccer Federation PO BO 1205 Richmond North VIC 3121**