



# Cunningham District Bowls Association Inc

ABN 30 083 980 317

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## Request for Substitute

Event

Event Date

Club

Person to be Substituted

Position in Team

Name of Substitute

Reason for Substitute

(Note: Holidays is not a valid reason for substitute.)

  
  

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**DECLARATION: I have read and understand the Laws of the Sport of Bowls, Domestic Regulations and Conditions of Play for the event relating to substitutes and confirm the applicant is a eligible substitute.**

Signed and Confirmed By Club Secretary: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### CDBA USE ONLY:

APPROVED CDBA MATCH COMMITTEE: YES/NO

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signed on behalf of Match Committee:

\_\_\_\_\_ / \_\_\_\_/\_\_\_\_

### BOWLS QLD USE ONLY:

APPROVED BQ MATCH COMMITTEE: YES/NO

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signed on behalf of BQ Match Committee:

\_\_\_\_\_ / \_\_\_\_/\_\_\_\_