



2014 ENTRY FORM

(PLEASE COMPLETE IN BLOCK CAPITALS)

Name of Team:..... Men's Ladies Mixed
(one entry form per team)

If a change of team name from 2013 please state previous name:

.....

Name of team secretary: Mr/Mrs/Miss/Ms:.....

Address:

.....

..... Post Code:

Please complete at least **two** of the following four contact options:

Tel No. Day: Mobile No.:

Tel No. Evening: Email Address:
(if different to above)

League and Division (if applicable):

Home alley address:

.....

..... Post Code:

Licensee/Managers Name: Tel No:

Please ensure you have informed the licensee/manager of your entry in the Championship.

Name of captain if different from secretary:.....

Name of Press Officer (see Rules and Regulations) Mr/Mrs/Miss/Ms:

Address:

.....

..... Post Code:

Tel No. Day: Tel No. Evening:

Mobile No.: Email Address:

Name of your local newspaper:

Name of local radio stations:

Name of regional TV station:

Does your home venue stock Butcombe Beer or Ashton Press Cider? Yes No

Please tick your preferred player registration option:

Please note payment **MUST** be included with this entry form regardless of option chosen.

Option 1: I wish to register my players now (complete the table below).

Option 2: I wish to register my players later (leave the table blank and send in a Player Registration Form forwarded on acceptance of entry).

We strongly advise you to keep a record of all registered players.

COMPLETE IN BLOCK CAPITALS

	Title	First Name	Surname	DOB	Signature
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					

Free temporary player – applicable to teams with 10 or more registered players (see Rule 8b).

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If you wish to register more players, please use an additional sheet of paper.

I wish to enter the named team into the Butcombe British Skittles Championship

Total number of registered players:.....

Minimum 8 players. You may add more players under the conditions stipulated in Rule 8a and 8b.

Total amount enclosed: £ £7.50 per person (Payment must be included for entry to be accepted)

All correspondence will be emailed unless no email address has been supplied.

I hereby acknowledge that I am in receipt and have read and understood the Rules and Regulations and on behalf of the persons named above and any additional person added to my team, agree to comply with all the conditions therein.

Signature: Date:
(Team Secretary)

Please send this form, together with your cheque made payable to **Shoot Out Club Ltd.** to:

Butcombe British Skittles Championship
Bank Chambers, 1 Vaughan Parade, Torquay, Devon TQ2 5EG

Tel: 01803 210210 Fax: 01803 203116
Email: bbbc@shootoutclub.co.uk Web: www.shootoutclub.co.uk/bbbsc



Closing date for entries 11th April 2014. Please drink Butcombe Bitter responsibly. www.drinkaware.co.uk



Shoot Out Club Ltd.
Registered Office: 78 Dolphin Crescent, Paignton, Devon TQ3 1JZ
Directors: B Pengelly & R Bourke
Registered in England & Wales under Number: 4574961 VAT No: 692 7233 13

