



2010 ENTRY FORM

(PLEASE COMPLETE IN BLOCK CAPITALS)

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

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

Address:
.....
..... Post Code:

Please complete at least two of the following four.

Tel No. Day: Mobile No.:

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

League and Division played in (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:

Would you be able to display a poster in your home venue? Yes No

Does your home venue stock Blackthorn Cider? Yes No

Please tick your preferred entry option:

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 Blackthorn 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: ££6.00 per person

I want to receive all correspondence by Post or Email (tick one only)

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:

Blackthorn 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/bbbc



Closing date for entries 31st March 2010

Please drink Blackthorn cider responsibly.

