

COUNTRY HOUSE POOL LEAGUE
REGISTRATION FORM

TEAM NAME: _____

PUB ADDRESS: _____

POST CODE _____

PHONE NUMBER _____

EMAIL _____

CAPTAIN _____

ADDRESS _____

POST CODE _____

PHONE NUMBER _____

EMAIL _____

VICE CAPTAIN _____

PHONE NUMBER _____

EMAIL _____

OTHER EMAIL

: _____
:
:
:
: _____

DATE HANDED IN ____ / ____ / ____

HANDED IN BY _____

£30 PER TEAM TO ENTER

FORM & MONEYS TO ALL BE IN BY:21/03/2012(AGM)