

THE SOMERVILLE LIVINGSTONE-LEARMONTH TROPHY

(0 - 6 Goals)

TUES 7^{TH} AUGUST – SUN 19^{TH} AUGUST 2018

TEAM NAME:		•••••	COLOURS:	
TEA	M CAPTAIN:			
HOM	ИЕ	· ·	WORK:	
MOE	BILE		FAX:	
EMA	AIL	• • • • • • • • • • • • • • • • • • • •		
		H/cap	Mobile	email
NO.	1			
NO.2				
NO.	3			
BAC	°K			
	will make every effort to accommodate but NO guarant			
The The In the I have by the	CIAL CONDITIONS Tournament will be played on Handicap under H.F. e event of a tie at the end of the fourth chukka goal re seen and read the General Conditions of Entry freem and any specific conditions set out above.	ls WILL For Tourn	NOT be widened for a aments at Beaufort Polo	fifth chukka Club and I agree to be bound
SIGNED (CAPTAIN): Date:				
mem Send paya	pleted entry forms with an entry fee of £200/player vector must reach the Polo Manager by Tuesday 24th Just completed application forms to Beaufort Polo Club, ble to Beaufort Polo Club. Debit card payments and narge. I enclose a cheque for £	uly 2018. , Westonb cheques of	irt, Tetbury, Glos, GL8 8 lo not incur a fee. Credit	SQW. Cheques should be made card payments will incur a 3%
	Please use reference SLL18 when paying via BACs			

Beaufort Polo Club Ltd. HSBC Sort Code: 40-43-21

Sort Code: 40-43-21 Account Number: 31631985

If you would like to pay via card over the phone, please contact the office on 01666 880501