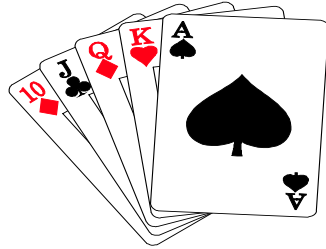


NATIONAL CRIBBAGE PAIRS CHAMPIONSHIPS



On behalf of Club

Full Club Address

..... Tel :-.....

Daytime Contact.....Tel:-.....email.....

**I wish to enter the following members for the
Club Union National Cribbage Pairs Championships**

(Please enter full names in BLOCK CAPITALS)

- 1) _____ And _____
- 2) _____ And _____
- 3) _____ And _____
- 4) _____ And _____
- 5) _____ And _____
- 6) _____ And _____
- 7) _____ And _____
- 8) _____ And _____

I enclose entrance fees totalling £....., at the rate of £15 per pair
I certify that the entrants are at least 18 years old and are members of this Club, and hold
Associate and Pass Cards Issued by this Club
The entrants agree to abide by the contest rules.

(Date)..... //Secretary

Return this form with entrance fees to:-

**The Leisure Department
CLUB & INSTITUTE UNION LIMITED
253 - 254 UPPER STREET, LONDON, N1 1RY**

Cheques and Postal orders should be made payable to
"CLUB & INSTITUTE UNION"

CLOSING DATE FOR THESE COMPETITIONS IS TUESDAY 3rd MARCH 2015