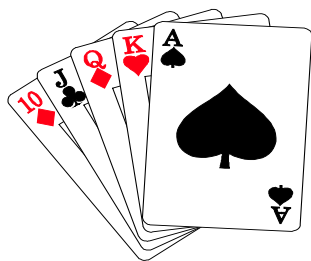


NATIONAL CRIBBAGE PAIRS CHAMPIONSHIPS



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 4th MARCH 2014