

**BUTCOMBE BRITISH SKITTLES CHAMPIONSHIP**

**MENS/ LADIES/ MIXED EVENT (Please indicate) Group.....**

**HOME ALLEY VENUE** \_\_\_\_\_

**DATE OF MATCH** \_\_\_\_\_

**TEAM NAME** \_\_\_\_\_

**TEAM NAME** \_\_\_\_\_

Please enter **FULL** Names and **All Players Sign the Form**

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<b>TOTAL LEG</b>								<b>TOTAL LEG</b>							

**CAPTAIN'S SIGNATURE** \_\_\_\_\_

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