

# BOWLS SOUTH AFRICA

## “B” INTER-DISTRICT TOURNAMENT 2015

### MEN’S TEAM ENTRY FORM

<b>DISTRICT</b>	
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NAME OF MANAGER \_\_\_\_\_

CONTACT NUMBER DURING TOURNAMENT \_\_\_\_\_

TEAM A	Known Name and Surname	Age	Bowls SA No.
Skip			
Third			
Second			
Lead			

TEAM B	Known Name and Surname	Age	Bowls SA No.
Skip			
Third			
Second			
Lead			
Reserve			

**ALLERGIES, ILLNESS OR CHRONIC CONDITIONS OF PLAYERS**

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District Contact No. \_\_\_\_\_

District e-mail \_\_\_\_\_

Signed District Secretary \_\_\_\_\_

Date \_\_\_\_\_