ENTRY FORM

This entry form can be downloaded to your computer, filled in and then emailed back to cancercarebridge@btinternet.com

All correspondence will be addressed to Player 1

There is no need to provide details if you entered last year and there is no change By completing this form, you agree that your personal data be retained for the sole purpose of administration associated with the CancerCare Bridge Tournament.

Player 1. Name (Mr/Mrs/Miss/Ms/Dr)	
Address	
Postcode Em	ail
Telephone	
Player 2. Name (Mr/Mrs/Miss/Ms/Dr)	
Address (if different from Player 1)	
Postcode Em	ail
Telephone	
Location of venue for home matches _	
If you wish to enter the Tournament b donation) $\ \Box$	y playing online the entry fee is £40 per pair: (£1 Entry fee and £39
If you will be making a donation to Ca amount here for admin purposes.	ncerCare in lieu of playing, tick here \square and indicate the
Please accept our thanks for this ver	y generous gesture in difficult times.
If you can gift aid the entry fee/donat	ion please read the declaration below and tick the box.
linked with the forms received.	e your full name as the reference to allow deposits to be easily Account Number: 34659218 Sort Code: 01-04-81
Cheques should be made payable to "Cheques should b	CANCERCARE BRIDGE"
Please return to: Liz Dean, Moorside Lodge Wyresdale Road Lancaster, Lancashire, LA1 3DY Te	lephone: 07702 092763 Email: cancercarebridge@btinternet.com
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Please help us to increase the value of your donation by 25% under the Gift Aid scheme.

I am a UK taxpayer and would like CancerCare to claim Gift Aid on this donation, any previous donations in the last 4 years and on all donations hereafter until I notify them otherwise. I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year, it is my responsibility to pay the difference. \Box