

**EDINBURGH INTERNATIONAL
SENIOR LADIES CURLING CHAMPIONSHIP**

Edinburgh Curling Club, 13a Riversdale Crescent, Edinburgh, EH12 5XN
Email: eicc@edinburghcurling.co.uk Telephone: 0131 337 4242

15 - 17 NOVEMBER 2019

COMPETITION ENTRY FORM

SKIP Surname_____ First name_____

THIRD Surname_____ First name_____

SECOND Surname_____ First name_____

LEAD Surname_____ First name_____

Contact Name _____

Address _____

_____ **POSTCODE** _____

EMAIL _____ **TEL** _____

I have paid by bank transfer (if sending your entry by email)/ enclose a cheque for £200*, made payable to Edinburgh International Curling Championships, with this entry form.

***Delete where appropriate**

Signed _____

Bank account details are

A/C NAME: Edinburgh International Curling Championships
A/C NO: 00132552
SORT CODE: 83-19-08
IBAN NO: GB20 RBOS8319 0800 1325 52
BIC NO: RBOS GB 2L
BANK: Comiston (B) Branch, Royal Bank of Scotland, Edinburgh.

If you are paying by bank transfer, please put your skip's name as reference and ensure that all bank charges are covered so that we receive the entry fee in full.

