

**Team Selection Form**

**10 Way Intercounty Tournament**

**\*Please tick the event(s) that you wish to be considered for**

|  |  |  |  |
| --- | --- | --- | --- |
| **Surname** |  |  |  |
| **Forename** |  |  |  |
| Title |  |  |  |
| Address |  | Male/Female |  | |
|  |  | Bow Type |  | |
|  |  | GNAS No. |  | |
|  |  | Club |  | |
| PostCode |  |  |  | |
| Tel – Home |  |  |  | |
| Mobile |  |  |  | |
| e-mail |  | Date of Birth |  | |

**Submitted Scores**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date Shot** | **Event** | **Round** | **Score** | **Office Use** |
|  |  |  |  |  |
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**Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**To be returned to Team Manager** [**-team.manager@ecaa.org.uk**](mailto:-team.manager@ecaa.org.uk)

**Sharon Lawrence 20 Dagnam Park Close Romford RM3 9YL (07887745809)**

|  |  |
| --- | --- |
| **Office use** |  |
| **Date received** |  |
| **Date acknowledged** |  |
| **Result** |  |