# 4 GOAL HANDICAP NOMINATION FORM

# 30th – 8th November 2015 @ Werribee Park National Equestrian Centre

### Each team will play 3 games. The final will be played at Chirnside, 8th November the morning of the Melbourne Cup – pending ground conditions, 12 goal draw and weather.

### *Note – The tournament has the discretion to amend scheduling of all games dependant on grounds, weather and play within the 12 goal tournament.*

**Limited to the first 8 teams to nominate.**

### Please ensure players read & complete all details below, including payment slip where necessary. Please note, players will be notified of times of play when all nominations have been received.

#### TEAM NOMINATION - Team name: ……………………………………………………………

1. Team Players:
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ handicap \_\_\_\_\_\_\_ member of \_\_\_\_\_\_\_\_\_\_ Polo Club
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ handicap \_\_\_\_\_\_\_ member of \_\_\_\_\_\_\_\_\_ Polo Club
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ handicap \_\_\_\_\_\_\_ member of \_\_\_\_\_\_\_\_\_ Polo Club
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ handicap \_\_\_\_\_\_\_ member of \_\_\_\_\_\_\_\_\_ Polo Club

##### TEAM CAPTAIN & CONTACT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#####  MOBILE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOTE: Nominations close on Monday 25th September 2015.**

**SCHEDULE OF FEES AS FOLLOWS:**

* $1650 inc GST per team

NB. Please complete the pay slip below or send a cheque made out to **Victorian Polo Club** to VPC at Level 4, 543-549 Bridge Road, Richmond, Vic, 3121 or email polomanager@elitesports.com.au

###### Please debit my credit card, or see attached cheque, for tournament entry fee to the value of:

###### $ \_\_\_\_\_\_\_\_ as payment for: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [teams’ name(s)]*

Visa//Master/Bankcard/Diners/Amex (*pls circle*) \_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_

EXP: \_\_\_\_\_\_/\_\_\_\_\_\_

Cardholders name: ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_

Please note: Amex credit card payments incur an additional 4% charge.

We look forward to welcoming you to an extremely enjoyable tournament.

Yours sincerely,

The Committee

Victorian Polo Club