





**Enter All details in BLOCK CAPITALS**

Incomplete details for any applicant may prevent the entry of the whole team

**NAME 2**

Surname										First Name									
DAY	MONTH	YEAR	SEX M/F	HOME ADDRESS				Number/Street											
DATE OF BIRTH										TOWN/CITY/REGION									
District/Suburb										TOWN/CITY/REGION									
POST/ZIP CODE					COUNTRY					DAY PHONE		Code	Number						
EMAIL																			

**NAME 3**

Surname										First Name									
DAY	MONTH	YEAR	SEX M/F	HOME ADDRESS				Number/Street											
DATE OF BIRTH										TOWN/CITY/REGION									
District/Suburb										TOWN/CITY/REGION									
POST/ZIP CODE					COUNTRY					DAY PHONE		Code	Number						
EMAIL																			

**NAME 4**

Surname										First Name									
DAY	MONTH	YEAR	SEX M/F	HOME ADDRESS				Number/Street											
DATE OF BIRTH										TOWN/CITY/REGION									
District/Suburb										TOWN/CITY/REGION									
POST/ZIP CODE					COUNTRY					DAY PHONE		Code	Number						
EMAIL																			

**NAME 5**

Surname										First Name									
DAY	MONTH	YEAR	SEX M/F	HOME ADDRESS				Number/Street											
DATE OF BIRTH										TOWN/CITY/REGION									
District/Suburb										TOWN/CITY/REGION									
POST/ZIP CODE					COUNTRY					DAY PHONE		Code	Number						
EMAIL																			

**NAME 6**

Surname										First Name									
DAY	MONTH	YEAR	SEX M/F	HOME ADDRESS				Number/Street											
DATE OF BIRTH										TOWN/CITY/REGION									
District/Suburb										TOWN/CITY/REGION									
POST/ZIP CODE					COUNTRY					DAY PHONE		Code	Number						
EMAIL																			

**NAME 7**

Surname										First Name																					
DAY	MONTH	YEAR	SEX M/F	HOME ADDRESS										Number/Street																	
DATE OF BIRTH										Town/City/Region																					
District/Suburb										Town/City/Region																					
POST/ZIP CODE										COUNTRY										DAY PHONE										Code	Number
EMAIL																															

**NAME 8**

Surname										First Name																					
DAY	MONTH	YEAR	SEX M/F	HOME ADDRESS										Number/Street																	
DATE OF BIRTH										Town/City/Region																					
District/Suburb										Town/City/Region																					
POST/ZIP CODE										COUNTRY										DAY PHONE										Code	Number
EMAIL																															

**NAME 9**

Surname										First Name																					
DAY	MONTH	YEAR	SEX M/F	HOME ADDRESS										Number/Street																	
DATE OF BIRTH										Town/City/Region																					
District/Suburb										Town/City/Region																					
POST/ZIP CODE										COUNTRY										DAY PHONE										Code	Number
EMAIL																															

**NAME 10**

**MINIMUM**

Surname										First Name																					
DAY	MONTH	YEAR	SEX M/F	HOME ADDRESS										Number/Street																	
DATE OF BIRTH										Town/City/Region																					
District/Suburb										Town/City/Region																					
POST/ZIP CODE										COUNTRY										DAY PHONE										Code	Number
EMAIL																															

**NAME 11**

Surname										First Name																					
DAY	MONTH	YEAR	SEX M/F	HOME ADDRESS										Number/Street																	
DATE OF BIRTH										Town/City/Region																					
District/Suburb										Town/City/Region																					
POST/ZIP CODE										COUNTRY										DAY PHONE										Code	Number
EMAIL																															

**NAME 12**

Surname										First Name																					
DAY	MONTH	YEAR	SEX M/F	HOME ADDRESS										Number/Street																	
DATE OF BIRTH										Town/City/Region																					
District/Suburb										Town/City/Region																					
POST/ZIP CODE										COUNTRY										DAY PHONE										Code	Number
EMAIL																															

**DEADLINES** Final Deadline **Wednesday 17 February 2010**



**WITHDRAWAL** Before 17 Feb 50% refund. After 17 Feb no refund. Withdrawals must be in **writing**. An athlete may be 'replaced' in the **identical event** subject to written details & a **£10 Fee** reaching Games Office by 17 Feb 2010. A 'replacement' after this date may be accepted at Games **discretion** subject to payment of an additional Games Entry Fee.

**CONFIRMATION** Entries will be confirmed after receipt of full payment which must be by Final Deadline.

**AMENDMENTS** A minimum £10 fee may be levied when changes to events are requested.

**REGISTRATION** **Before** competing all entrants **must Register in person** at the SuperCentre - Action Indoor Sports Registration Hours are **Sat** 0830 - 0930.

**UNDER AGE** Entrants under 18 years must provide parental or guardian consent below.

I hereby give my consent for ..... to compete.  
Name of Entrant

..... Parent  Guardian   
Print Name Signature

**FEES** Fees may be paid by entrant or be partly or fully subsidised by the Organisation.

Entries received after Final Deadline may be accepted at Games discretion. **subject** to availability & payment of the Games Fee plus a Late Fee of £25.

**Games Entry Fee £50 + VAT per person**

Athletes  x £50  Net + VAT  @15% = £  Total

**BANK DETAILS** **HSBC Bank**  
Sort Code **40 36 15**  
Account No. **02096447**  
VAT Reg. No. 627174927

**PAYMENT** Fees (exclusive of bank charges) are made payable to **Corporate Games** by

- Bank Transfer/Draft **Copy must be attached**
- Corporate Team Account
- Cheque  Credit Card

Number  MasterCard  Visa   
Name..... Expiry Date   
Address.....  
Signature..... Security Code   
For Office use only Authorisation Code .....

**WAIVER & CERTIFICATION**

I/we for my/our heirs, executors, & assigns do hereby remise, release, & forever discharge the Games, its agents, its licensor, affiliates, officers, firms, associates, officials, volunteers & all & sundry other persons, bodies corporate, participants, & all participating in or connected with the Games of actions, causes of actions, claims or demands, which I/we have ever had, now have, or may hereafter have against the Games for or by reason of officiating, volunteering, entering or competing in this competition or in any of the activities associated with it. I/we hereby grant to the Games & its affiliates the right to use my/our name & picture, to preserve the entry & results data obtained & stored in a computerised data system, & to use such data to further the interest of the Games. In the event of injury, accident, &/or illness during the competition I/we will accept the medical treatment that may be deemed necessary by the Games medical service.

**RETURN TO**

I/we agree to abide by all **Corporate Games** rules & regulations

Print Name.....

Signature..... Date..... /..... /.....

The Games is not responsible for misdirected, lost or delayed mail or printing error. Schedules & Venues may be changed. Should the Games or any Sport or Associated Event be cancelled as a result of circumstances beyond the control of the Organisers no refunds will be made. The Games reserves the right to make any changes in conditions of entry & to decline any application at its discretion. English is the Official Language.



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