

Derbyshire Squash & Racketball

SUMMER LEAGUE 2013 APPLICATION FORM MEN'S, LADIES' & RACKETBALL

Reply to: Ms Gill Ford, League Secretary, 2 Snake Lane, Duffield, Derby DE56 4FF
tel. 07971 346 927 email : gill@derbyshiresquash.co.uk www.derbyshiresquash.co.uk

Entry Deadline : 31 March 2013

Dates for your diary:

Proposed start date : week 1 w/c 22 April (Thursday 25 April)
week 2 w/c 29 April (Thursday 2 May)

CLUB DETAILS

Name of Club _____

Address _____

Post code _____ Telephone number _____

CLUB CONTACT DETAILS - please give main contact and second contact - both must have email address (this will be used for most communications)

Name of main contact _____ Tel: _____

Address _____

_____ Post code _____

Email: _____

Name of second contact _____ Tel: _____

Address _____

_____ Post code _____

Email: _____

Club details and club contact details will posted on www.derbyshiresquash.co.uk

To improve communications between clubs and the DSR please include Team Captains' details.
Details will be given out to other club's teams on request.

SQUASH MEN

1st Team: Home match night: _____ Start time: _____ KO Cup: Yes / No

Contact Name: _____ Tel: _____

Email: _____

2nd Team: Home match night: _____ Start time: _____ KO Cup: Yes / No

Contact Name: _____ Tel: _____

Email: _____

3rd Team: Home match night: _____ Start time: _____ KO Cup: Yes / No

Contact Name: _____ Tel: _____

Email: _____

4th Team: Home match night: _____ Start time: _____ KO Cup: Yes / No

Contact Name: _____ Tel: _____

Email: _____

5th Team: Home match night: _____ Start time: _____ KO Cup: Yes / No

Contact Name: _____ Tel: _____

Email: _____

6th Team: Home match night: _____ Start time: _____ KO Cup: Yes / No

Contact Name: _____ Tel: _____

Email: _____

SQUASH WOMEN

1st Team: Home match night: _____ Start time: _____ KO Cup: Yes / No

Contact Name: _____ Tel: _____

Email: _____

RACKETBALL

1st Team: Home match night: _____ Start time: _____ KO Cup: Yes / No

Contact Name: _____ Tel: _____

Email: _____

2nd Team: Home match night: _____ Start time: _____ KO Cup: Yes / No

Contact Name: _____ Tel: _____

Email: _____

ENTRY FEES

Men: No. of Teams _____ **Women:** No. of Teams _____ **Racketball:** No. of Teams _____

Total No. of Teams _____ @£25 per team = £ _____ **Cheques** to "Derbyshire Squash & Racketball"