



BORDER MASTERS HOCKEY ASSOCIATION

MASTERS TOURNAMENT IN BENONI 9TH TO 13TH AUGUST 2017

Please complete this form in legible writing and hand it to Sherelee Norman or Sue Piderit.

Full Name: _____

Home Address: _____

Identity Number: _____

Club: _____

Contact Numbers: Work: _____

Home: _____

Cell: _____

E-mail: _____

REGISTERED WITH BORDER HOCKEY THROUGH YOUR CLUB YES..... NO.....

MASTERS AFFILIATION R50 PAID FOR 2017:- YES..... NO.....

I hereby undertake to pay the REFUNDABLE deposits
– Once selected it is NON-REFUNDABLE.

R1000 by 30th November 2016
R1000 by 31st January 2017
R1000 by 28th February 2017
R1000 by 31st March 2017
R1000 by 30th April 2017
Balance due by 30th June 2017

Signed: _____

Date: _____