

# 2020 PERSONAL TRUST ALL CAPE TOURNAMENT

## *MENS TEAM DECLARATION FORM*

Completed form to be presented to the Tournament Official at Registration or at First Playing Venue

District	Club	Section	Skip's First Name & Surname	Contact number (during Tournament)
<b>WPB</b>	<b>Mowbray</b>	<b>1</b>	<b>Wade Pretorius</b>	<b>064 651 6525</b>

	BSA Number	First Name & Surname (Not just initials)	Known as
1	41534	<b>Wade Pretorius</b>	<b>Wade</b>
2	51491	<b>Dave van der Walt</b>	<b>Dave</b>
3	32453	<b>Warren Hewitt</b>	<b>Warren</b>
4	30003	<b>Tom van Vlaanderen</b>	<b>Tom</b>
5 Reserve			
6 Reserve			

I declare that the players listed above are eligible to represent the Club in the Tournament

Date : \_\_\_\_\_

SIGNATURE OF SKIP : \_\_\_\_\_