BUXTED PLAYERS QUIZ NIGHT – FRIDAY 4TH OCTOBER 2024

ENTRY FORM

TEAM NAME:	
LEAD NAME:	
CONTACT DETAILS:	
EMAIL / TELEPHONE	
NUMBER OF	
PLAYERS:	

*We only request your contact details should we need to contact you in respect of this event.

☐ However, if you would like to receive information of our future events via our newsletter just tick this box. You can unsubscribe at any time.

Please make BACS payments to:

Name of account: Buxted Players

Sort code: **30-99-50**

Account No: **45332068**

As a reference please insert your team name followed by QUIZ (e.g **Guys & Dolls QUIZ**)

Please download this form, complete and send to buxtedplayers@gmail.com

Any queries please call 077022 66582