

Special Request Form



To • Corporate Games

FAX • 1 300 301 419

Date • _____

ALL details on this form must be complete

ORGANISATION

SPORT

EVENT & AGE CLASS

TEAM NAME if applicable

IMPORTANT NOTE – START TIMES ARE NOT GUARANTEED

The Games will do its best to give entrants/teams their requested start time but can not guarantee this request

This form must be submitted no later than the Entry Deadline

REQUEST eg START TIME OR VENUE

Authorised by (to be one of the following) Corporate Team Leader Team Captain Individual

Name _____

Contact Details _____

Address + Phone
and
Fax or Email

Signature _____ Date _____

Please return to the Games Office immediately via fax on 1300 301 419 or attach to your completed Entry Form



Return to Games Office via the following:

Tel 1300 301 418
Fax 1300 301 419
Email QCG@corporategames.net.au
Web corporategames.net.au
Mail PO BOX 15666 City East QLD 4002
ABN 64 056 480 543

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Date Received _____

Information entered in database _____ by _____ date _____

Sheet transferred to Sport Book _____ by _____ date _____