**Insurance Charities Golf Day Entry Form**

Team Name (Optional): ...............................................................................................................................

Team Leader:

............................................................................................................................................

Golf Club or Society: .............................................................................................................................

Handicap: ....................................................

Player 2: ...................................................................................................................................................

Golf Club or Society:

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Handicap: ...................................................

Player 3: ....................................................................................................................................................

Golf Club or Society:

..............................................................................................................................

Handicap: ...................................................

Player 4: .....................................................................................................................................................

Golf Club or Society:

...............................................................................................................................

Handicap: ...................................................

Cheque/Cheques £....................... Enclosed In Favour Of The Insurance Institute Of Southampton

Or BACS Payment of £…………

Insurance Institute of Southampton

Sort Code 20 79 25

Account No. 60502138

Barclays