



POLOCLUB  
SCHLOSS  
EBREICHSDORF

Entry form  
**AUTUMN CUP**  
August 31 – September 2, 2018

Club .....  
 Team name .....  
 Team captain .....  
 Team colors .....  
 Address .....  
 Phone .....  
 Email .....

Names of players	Handicap
1. ....	.....
2. ....	.....
3. ....	.....
4. ....	.....
Team handicap	.....

Stabling:  
 Number of horses .....

Date of arrival .....	Date of departure .....
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By signing this entry form the team captain acknowledges and accepts all the conditions of the tournament, the club rules and the HPA rules for him/herself as well as his or her team mates.

Account details: Richard Drasche-Wartinberg'sche Gutsverwaltung, Raiffeisenbank Region Baden, Zweigstelle Ebreichsdorf  
 IBAN. AT84 3204 5001 0500 4338, BIC: RLNWATWWBAD

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 Location & date

.....  
 Signature team captain