

Company Name:	Fancy Dress Theme:
Name :	Name :
Address:	Address :
Date of Birth :	Date of Birth :
Home Tel:	Home Tel:
Mobile :	Mobile :
Emergency Name :	Emergency Name :
Emergency No. :	Emergency No. :
Signature :	Signature :
You are signing to confirm that you have read the Entry Rules & Procedures. Name:	You are signing to confirm that you have read the Entry Rules & Procedures. Name:
Address:	Address :
Date of Birth :	Date of Birth :
Home Tel:	Home Tel :
Mobile :	Mobile :
Emergency Name :	Emergency Name :
Emergency No. :	Emergency No. :
Signature :	Signature :
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Address:	Address :
Date of Birth :	Date of Birth :
Home Tel:	Home Tel :
Mobile :	Mobile :
Emergency Name :	Emergency Name :
Emergency No. :	Emergency No. :
Signature :	Signature :
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Please return completed form before Monday 18th July 2016 to Scott Ross (Peterhead Scottish Week) 17 Meethill Road, Peterhead, Aberdeenshire AB42 2YW