

QUEENSTOWN BOWLING CLUB

TWILIGHT BOWLS 3 FIVE

Team Registration Form 2025

Team Name: _____

Contact Person: _____ Cellphone: _____

Email : _____

Alternate Contact
Person : _____ Cellphone : _____

Email : _____

Entry Fee \$150.00 Team

TEAM MEMBERS	NAME	Email
1:	_____	_____
2:	_____	_____
3:	_____	_____
4:	_____	_____
5:	_____	_____
6:	_____	_____

Complete Registrations forms to :

Wayne Dowman

Email : info@bowlsqueenstown.co.nz
or : dowman.queenstown@xtra.co.nz
Phone : 0276516617

Payment Details :

If you wish to pay by direct credit please use team name as reference : ANZ 060996-0727727-00
Credit card or cash on the day.