

# ROEHAMPTON CLUB UNIVERSITY CUP

## 8 FEBRUARY 2025

### APPLICATION FORM FOR PARTICIPATION IN UNIVERSITY SQUASH TEAM EVENT

(Please Type or Print Clearly in Ink)

**University Name :** .....

**Billing Address :** .....

.....

.....

.....

**Contact Name :** .....

**Contact Telephone No. :** .....

**E-mail :** .....

**Team Captain /**

**Manager details :** .....

**Players :**

(Please state gender  
& ranked if known)

**T-SHIRT SIZE**

**1**.....

.....

male/female

**2**.....

.....

XXL-48"/18

XL-45"/16

L-43"/14

M-40"/12

S-38"/10

XS-35"/8

**3**.....

.....

**4**.....

.....

**5**.....

.....

**6**.....

.....

I confirm that ..... will be attending the Roehampton Club University Cup.

**Signed** .....

**Position**.....

An invoice for £45.00 per person entry fee will be sent to you upon our receipt of this completed form.

Please note: your entry will be guaranteed once your payment has been received.