

Ron Jacobs  
87 Highbury Grove  
Cosham  
PO6 2RL

GROUP NAME:.....

CONTACT LEADERS NAME & TEL.....

LEADER MAY OFFER HELP IF THEY WISH BUT NOT COMPULSORY. YES / NO

Please fill in the forms in **BLOCK CAPITALS** giving **ALL** the information required.

## CHESS

NAME:.....D.O.B.....

NAME:.....D.O.B.....

NAME:.....D.O.B.....

NAME:.....D.O.B.....

NAME:.....D.O.B.....

NAME:.....D.O.B.....

## DRAUGHTS

NAME:.....

NAME:.....

NAME:.....

NAME:.....

NAME:.....

NAME:.....

ALL ENTRY FORMS TO BE **RETURNED BY THE 17<sup>TH</sup> FEBRUARY 2018.**  
NO LATE ENTRIES WILL BE ACCEPTED AFTER THIS DATE.  
RETURN FORMS TO THE ABOVE ADDRESS.

NO CHESS AND DRAUGHTS BOARDS REQUIRED.  
FULL PAYMENTS OF £3.50 P/H TO ACCOMPANY THIS FORM. CASH PREFERRED OR CHEQUES  
PAYABLE TO "CITY OF PORTSMOUTH SCOUT ACTIVE SUPPORT".  
PLEASE DO NOT ABBREVIATE  
NO REFUNDS CAN BE MADE.



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