| The MLCC Entry Form:  | Date of Event:   |
|---|--|
| Contact Name:   | Club:  |
| Address:  |  |
| Notify team of draw time via phone or e-mail: (Circle one please)           |  |
| E-mail address:   | Phone:   |
| Skip:   | Mate:  |
| 2nd:  | Lead:  |
| Saturday Draw preference: 9:00 am   | 11:00am  |
| Mail Entry Fee To: Maple Leaf Curling Club P.O. Box 94 O'Leary, PEI COB 1VO | Make Cheques payable to:  Maple Leaf Curling Club in the sum of: \$100.00/team |
| Fees must be paid two weeks prior to event.                                 |  |
|   |  |
| The MLCC Entry Form:  | Date of Event:   |
| Contact Name: Clu   | ıb:  |
| Address:  |  |
| Notify team of draw time via phone or e-mai                                 | il:(Circle one please)   |
| E-mail address:   | Phone:   |
| Skip: <i>M</i>  | Nate:  |
| 2nd: Le   | ead:   |
| Saturday Draw preference: 9:00 am   | 11:00am  |
| Datarday Braw preference: 5.00 am   | _ 11.00dm  |

P.O. Box 94

O'Leary, PEI COB 1VO

Fees must be paid two weeks prior to event.

Maple Leaf Curling Club in the sum of: \$100.00/team