

Marie Curie Bridge Tournament 2023/24

Group entry form



Care and support
through terminal illness

Entries must be in by May 31, 2023

Please return the form to:

**Marie Curie Bridge Tournament (PCMCBT)
Badcocks Farmhouse
Saling Road
Stebbing, Essex
CM6 3TD**

Email: pcmcbt@gmail.com

If there are more than six pairs in this group,
please photocopy this form and fill in the extra pairs
before sending both forms in together.

AREA ORGANISER (if known)

The entry is £4 per person with a suggested voluntary donation of £21 per person making the total £25, but all donations are welcome. The more generous you are means Marie Curie will be able to support more people and their families living with a terminal illness. Because of new HMRC rules we now have to ask for each Gift Aid claimant to send their own cheque of pay for themselves by BACS.

- £20 is the cost of providing a Marie Curie Nurse for one hour in a patient's home.
- £35 pays for a slide sheet used by Marie Curie Nurses to move patients in bed
- £135 would pay for attendance at a Day Therapy unit for one day in a Marie Curie Hospice.

Please make cheques payable to **PCMCBT – SORRY BUT WE CANNOT ACCEPT CAF CHEQUES**. You can also pay by BACS, using your group number (if known) as the reference and confirm payment by email.

**Acc. Name: PCMCBT Sort code: 08-92-99.
Acc. No: 65527405**

Please type in your details or use **BLOCK CAPITALS**

Please tick the box if you are happy for your telephone number to be published in the directory.

Acknowledgements will be sent to the Group Leader via email, alternatively please enclose a S.A.E

Pair 1	Entry fee – PLEASE SEE ABOVE.					
Group Leader:	Title	Initial	Name:	Title	Initial	
First Name	Surname		First Name	Surname		
Address:			Address:			
Postcode:			Postcode:			
Tel:	Please note this is essential to take part and be included in the Bridge Directory.		Tel:	Please note this is essential to take part and be included in the Bridge Directory.		
Email:			Email:			
For payment details see above £ _____			For payment details see above £ _____			

Pair 2	Entry fee – PLEASE SEE ABOVE.					
Name:	Title	Initial	Name:	Title	Initial	
First Name	Surname		First Name	Surname		
Address:			Address:			
Postcode:			Postcode:			
Tel:	Please note this is essential to take part and be included in the Bridge Directory.		Tel:	Please note this is essential to take part and be included in the Bridge Directory.		
Email:			Email:			
For payment details see above £ _____			For payment details see above £ _____			

Marie Curie provides high quality nursing, totally free, to give people with terminal cancer and other illnesses the choice of dying at home, supported by their families.

Pair 3	Entry fee – PLEASE SEE OVERLEAF.					
Name:	Title	Initial	Name:	Title	Initial	
First Name	Surname		First Name	Surname		
Address:			Address:			
		Postcode:			Postcode:	
Tel:	Please note this is essential to take part and be included in the Bridge Directory.		Tel:	Please note this is essential to take part and be included in the Bridge Directory.		
Email:			Email:			
For payment details see overleaf £ _____			For payment details see overleaf £ _____			

Pair 4	Entry fee – PLEASE SEE OVERLEAF.					
Name:	Title	Initial	Name:	Title	Initial	
First Name	Surname		First Name	Surname		
Address:			Address:			
		Postcode:			Postcode:	
Tel:	Please note this is essential to take part and be included in the Bridge Directory.		Tel:	Please note this is essential to take part and be included in the Bridge Directory.		
Email:			Email:			
For payment details see overleaf £ _____			For payment details see overleaf £ _____			

Pair 5	Entry fee – PLEASE SEE OVERLEAF.					
Name:	Title	Initial	Name:	Title	Initial	
First Name	Surname		First Name	Surname		
Address:			Address:			
		Postcode:			Postcode:	
Tel:	Please note this is essential to take part and be included in the Bridge Directory.		Tel:	Please note this is essential to take part and be included in the Bridge Directory.		
Email:			Email:			
For payment details see overleaf £ _____			For payment details see overleaf £ _____			

Pair 6	Entry fee – PLEASE SEE OVERLEAF.					
Name:	Title	Initial	Name:	Title	Initial	
First Name	Surname		First Name	Surname		
Address:			Address:			
		Postcode:			Postcode:	
Tel:	Please note this is essential to take part and be included in the Bridge Directory.		Tel:	Please note this is essential to take part and be included in the Bridge Directory.		
Email:			Email:			
For payment details see overleaf £ _____			For payment details see overleaf £ _____			