

CONDITIONS OF ENTRY & OTHER INFORMATION:

QBA REGULATIONS APPLY

Please see Section F for Residential Qualifications and other obligations.

Each pair must have two systemically identical 4 page ABF system cards on the table for the opposing pair before the start of play.

System Cards must be legible and clearly show the colour category of the system.

All systems permitted. Yellow systems must be in the hands of the Chairman, Tournament Committee by 10 am 26th April 2010

Scoring Method: Cross Imps
Converted to VPs using the Wallace Scale

2010

AUSTRALIAN NATIONAL CHAMPIONSHIPS

WILL BE CONDUCTED IN

HOBART, 17TH JULY TO 29TH JULY

ANC TEAMS 18TH - 23RD JULY

Enquires and Entries to Kim Ellaway,
22 Mareeba Court, Arana Hills, 4054, email
manager@qldbridge.com or phone 3351 8602

2010



SENIOR

SELECTION TRIALS

For players born before 1/1/1951

**2010 QBA TEAM MEMBERS MUST ATTEND
THE QBA ANC TEAMS DAY ON JUNE 26**

FORMATS & FEES

FOR A FIELD OF 12 PAIRS OR FEWER:

STAGE ONE ONLY PLAYED OVER FOUR DAYS

MAY 1,2, & MAY 29,30

Entry Fee: \$120 per player

FOR A FIELD OF 13 PAIRS OR MORE:

STAGE ONE USING SEEDED MITCHELLS

MAY 1, 2

Entry Fee: \$60 per player

10 PAIRS WILL QUALIFY FOR STAGE TWO -

(3 DAYS) - MAY 8, 29,30

Entry Fee: \$90 per player

PLAY STARTS FOR ALL ENTRANTS AT

10.00 AM SATURDAY MAY 1 2010

(UNLESS OTHERWISE ADVISED)

ENTRIES CLOSE - Wed 28TH April 5.00 pm

\$60 per player to be included with entry

Any balance payable prior to start of relevant stage

Venue - QCBC

Director - Alan Gibson

BYO LUNCH

THERE WILL BE NO FACILITIES TO ORDER LUNCH

**2010 SENIOR SELECTION TRIALS
ENTRY FORM**

PLAYER ONE

I agree to abide by the QBA regulations pertaining to this event plus any additional regulations set down by the organising body.

.....
Signature

.....
Email Address

PLAYER TWO

I agree to abide by the QBA regulations pertaining to this event plus any additional regulations set down by the organising body.

.....
Signature

.....
Email Address

Credit Card Payment Details or cheque made payable to QBA

Please charge to my credit card the amount of \$

Mastercard Visa

Name on Card

Card Number:

Expiry Date: / CCV No

Cardholder's Signature

