

HASTINGS OPEN BOWLS TOURNAMENT APPLICATION FOR PARKING PERMITS

I/We wish to apply for parking permits

Please complete in CAPITAL letters

Name:

Address:

Postcode:

Tel no:

Vehicle Reg:

Name:

Address:

Postcode:

Tel no:

Vehicle Reg:

Name:

Address:

Postcode:

Vehicle Reg:

• Please note- ALL details must be supplied prior to permits being issued •