

ELLERSTON ONASSIS POLO

ARCHIBALD – CUDMORE TROPHY

8 GOAL TOURNAMENT

Saturday the 11th – Sunday 19th of October 2025

NOMINATION FORM

TEAM NAME: _____

TEAM COLOURS: _____

TEAM CAPTAIN: _____

PLAYERS NAMES	HANDICAP	HORSE NO.	TELEPHONE & EMAIL DETAILS
1 _____	_____	_____	_____
2 _____	_____	_____	_____
3 _____	_____	_____	_____
4 _____	_____	_____	_____
TOTALS: _____		_____	_____

PLAYER ACCOMMODATION: (Please complete the Player Accommodation Requirements for each individual Player and indicate if being accompanied by wife, children, partner.)

NAMES	ARRIVAL DATE	DEPARTURE DATE
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____
4 _____	_____	_____

GROOM ACCOMMODATION (Please provide the name of the grooms and if there are any preferences regarding twin share or single accommodation.)

NAMES	
1 _____	5 _____
2 _____	6 _____
3 _____	7 _____
4 _____	8 _____

NOMINATION FORMS ARE TO BE LODGED WITH ELLERSTON ONASSIS POLO

BY FRIDAY THE 10th OF SEPTEMBER 2025

TOURNAMENT ENQUIRIES

James Harper:

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All Tournament Participants and Visitors are required to comply with the Ellerston WH&S Policies and Procedures.

A copy will be provided to you on your arrival at “Ellerston”.

