



BMX NZ Event ENTRY FORM

Event Name: **Da\$h 4 Ca\$h**

Date: **18-Oct-2014**

Contact Name: _____

Phone Number: _____

Email: _____

Mobile Number: _____

Please complete the entry form in full with correct rider details

Licence No	First Name	Last Name	Gender M/F	Age UCI	Sprockets Age on the day	Date of birth	Club Prefix	Bike Number	Class

Fee Enclosed \$ _____

Entries close: **Postal: 10-Oct Email: 14-Oct**

MONEY WITH POSTAL ENTRY PLEASE. BANK DEPOSIT BY 14 October.

Please tick method of payment: ☐ Cheque ☐ Cash ☐ **Bank Deposit**

When making bank deposit, please email your entry form to entries@papakurabmx.co.nz

Once deposit has been received you **will receive an email confirming receipt of entry**

Bank Account Details:

ASB Papakura
12-3031-0614295-00

Please ensure the following is completed:

Reference: Surname of Rider
Particulars: Club Prefix
Code: Contact phone number

Post Entries to

Leanne Carter
279 Point View Drive
Shamrock Park
Auckland 2016

Entry Enquires to:

Leanne 09 534-1778 / 021-280-1179

On day contact:

Bryan 021-230-5223

I agree with the terms and conditions of entry and acknowledge the organisers disclaimer on the Event flyer.

ENTRY FORM MUST BE SIGNED AND RETURNED TO COMPLETE ENTRY

Signed _____ Name _____