



BMX NZ Event ENTRY FORM

EVENT Name **CAMBRIDGE TWILIGHT 2014** Date: **Saturday 15TH November 2014**

Contact Name _____ Contact Phone Number _____ Fax Number _____

Email _____ Mobile: _____

Please complete the entry form 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 Event	Fee

Entry fee: \$25 - Sprockets/20"/Cruiser (2nd class \$10), Superclass \$25 (pre entry or enter on day)

Entries Close **8th November 2014**

Fee Enclosed \$ _____

I agree with the terms and conditions of entry and acknowledge the organiser's disclaimer on the event flyer. This form must be signed and returned to complete entry.

Signed _____ **Name** _____

Post Entries to

Cambridge BMX Club
P.O Box 843
Cambridge

E-mail Entries to

cambridgebmx@hotmail.com
Particulars – surname
Code – club prefix
Reference – contact phone numbers
Bank Details:
Westpac **03 1568 0041299 00**

Track Contact: 0276811954