



# BMX NZ Event ENTRY FORM

**EVENT Name: Central Region Champs**

**Date: Sunday 7<sup>th</sup> December 2014**

**Entries Close: Monday 1st December 2014 NO LATE ENTRIES WILL BE ACCEPTED**

**Contact Name:** \_\_\_\_\_

**Contact Phone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

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: \$20.00 per class (2<sup>nd</sup> class \$10.00)**

**Individual Entries**    **Fee Enclosed**    \$ \_\_\_\_\_

**I agree with the terms and conditions of entry and acknowledge the organiser's disclaimer on the entry form.**

<b>Payment Method:</b> <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Bank Deposit
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**Signed:** \_\_\_\_\_

**Name:** \_\_\_\_\_

### **Email Entries:**

Complete this form and email all details to: [centralregionbmx@gmail.com](mailto:centralregionbmx@gmail.com) by 7pm 1/12/14

Make payment into BNZ Bank Account:

Central Region BMX

A/C #: 02-0348-0004328-00 **by 1/12/14**

**Please** use the following transaction reference fields:

Particulars = Surname of **Contact Name** as used above

Code = **Club Prefix**

Reference = **Contact Phone Number** as used above.

**Thank you.**

**Confirmation of receipt of entries will be emailed - please ph Sue on 0211692327 if you have any queries**

### **Postal Entries**

Sue Walker  
Central Region BMX  
6 Ward Street  
Kawerau 3127