

BMX NZ Event ENTRY FORM

| Event Name: Contact Name | | Levin Meeting - NQM | | | Date: Sunday 8 ^t Phone Number: | | lay 8 th F | th February 2015 | | | |
|--|---|--|---------------|---|---|----------------|-----------------------|---|-----------------|---------|--|
| Email: | | | | | Mobile Number | : | | | | | |
| | | Please compl | ete the entry | y form | in full with cor | rect rider det | ails | | | | |
| 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 | |
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| Entry Fees: Sp | prockets/20"/CR \$30. | 00, 2nd class \$10 | | | | | | | | | |
| Fee Enclos | ed \$ | | | | Entries cl | ose: Sund | ay 1 Feb | ruary 20° | 15 (No Late e | ntries) | |
| MONEY WIT | TH POSTAL ENTR | Y PLEASE. BANK | DEPOSIT B | Y 1 F | eb 2015 | | | | | | |
| Please tick method of payment: Cheque Cash Bank Deposit | | | | | | | | Or Post Entries to: | | | |
| When making bank deposit, please email your entry form to levinbmxclub@gmail.com You will receive an email confirming receipt of entry | | | | | | | | Club Secretary Georgina Mackay | | | |
| Levin BMX Club | | | Refere | Please ensure the following is completed: Reference: Surname of Rider | | | | 22 Potts Rd, Rd 1, Levin 5571 Entry/ On the day contact: | | | |
| Westpac | Westpac 03-0667-0396015-00 Particulars: Club Prefix | | | | Llub Prefix | Prefix | | | Georgina Mackay | | |
| | | of entry and acknowled TURNED TO COMPLETE F | | ser's di | sclaimer on the Ev | ent flyer. | | (| 027 4139088 | | |
| Signed | | Name | | | | | | | | | |