

BMX NZ Event ENTRY FORM

| | Event Name: WAIKATO REGION CHAMPS - Tri Series Contact Name: | | | | Date: Saturday 10 th /Sunday 11 th October 2015 Phone Number: | | | | | |
|--|---|-----------|---------------|------------|--|---------------|---|----------------|----------------------------|--|
| | | | | | | | | | | |
| | Email: | | | | | | | | | |
| 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 20"/CR/Superclass | |
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| Entry Fee: \$30 per class, Superclass \$30 | | | | | | | | | | |
| Fee Enclosed \$ Entries close: 3rd October 5pm ** NO LATE ENTRIES | | | | | | | | | | |
| Please tick method of payment: Cheque Cash Bank Deposit | | | | | | | Post Entries to | | | |
| When making bank deposit, please email your entry form to: cambridgebmx@hotmail.com Once deposit has been received you will receive an email confirming receipt of entry | | | | | | | WAIKATO REGION BMX PO BOX 843 CAMBRIDGE | | | |
| Bank Account Details: Waikato Region BMX Reference: Surname of Rider Westpac 03 1568 0078219 00 Please ensure the following is completed: Reference: Surname of Rider Particulars: Club Prefix | | | | | | | Entry Enquires to: 0276811954 | | | |
| agree with the terms and conditions of entry and acknowledge the organiser's disclaimer on the Event flyer. ENTRY FORM MUST BE SIGNED AND RETURNED TO COMPLETE ENTRY | | | | | | | | | | |