

CHARLESTOWN REGATTA FUN

Application Form Saturday 25th July 2015

Forename:	Surname:	
Date of Birth: / /	Age	_ (under 16 require letter of consent)
Male / Female* Address:		
Postcode	Tel No	
Email		
T-Shirt Size: S M L	XL	
Teams Only: Team Name		
Athlete 1 Sea Swim :200m Forename	_Surname	Age:
Athlete 2 Cycle: 4 miles Forename	_Surname	Age
Athlete 3 Run: 2 miles Forename	_Surname	Age
Race Waiver to be signed by all comp I declare that I will abide by the rules & accep damage claim or expense which may arise a care & attention & abide by the normal rules helmets must be worn.	ot the event organizers s a consequence of my	participation in this event. I will cycle with
Entry Fee: Individual £20 per person Team Please note that entries will not be registered Entry form available @ crbo.co.uk & www.cd cancelling will have their fee donated. Post to	d until payment has been harlestownregatta.co.ul	n received by Wednesday July 29th This is a charity event , any participants

Signed:_____

Date:____