

XCOSA TIMING RACE ENTRY (XCM)

PLEASE PRINT

First Name: Last Name: Race number:

Date of birth:
(dd/mm/yyyy) Gender:

Female:	<input type="checkbox"/>
Male:	<input type="checkbox"/>

 Region:

School/Club/Team name: CSA Licence:

Entry fee: R	Late entry fee: R	Total: R	Mark category to enter (age on 31 Dec):	S Jnr 13-14 (20km)	Yth 15-16 (40km)	Open 19-59 (40km)	Vet 40-49 (60km)
				Open 15-69 (20km)	Jnr 17-18 (40km)	Elite 19-29 (60km)	Master 50-59 (60km)
				G Master 60 + (40km)	S Vet 30-39 (60km)		

Contact Number: Email:

I acknowledge that I have read, understand and agree to the indemnity. I also confirm that this information is correct

 Signature of entrant/legal guardian Date

XCOSA TIMING RACE ENTRY (XCO)

PLEASE PRINT

First Name: Last Name: Race number:

Date of birth:
(dd/mm/yyyy) Gender:

Female:	<input type="checkbox"/>
Male:	<input type="checkbox"/>

 Region:

School/Club/Team name: CSA Licence:

Entry fee: R	Late entry fee: R	Total: R	Mark category to enter (age on 31 Dec):	NIP <11	Yth 15-16	Elite 19-29	Master 50-59
				Sprog 11-12	Jnr 17-18	S Vet 30-39	G Master 60 +
				S Jnr 13-14	U/23 19-22	Vet 40-49	

Contact Number: Email:

I acknowledge that I have read, understand and agree to the indemnity. I also confirm that this information is correct

 Signature of entrant/legal guardian Date