

# BOFRA

## RACE ENTRY FORM 2012

Race no
---------

First Name \_\_\_\_\_ Surname \_\_\_\_\_

Age (on 1 May 2012) \_\_\_\_\_ Club \_\_\_\_\_

CATEGORY: MALE - U9 / U12 / U14 / U17 - MU23 / MV40 / MV45 / MV50 / MV60  
Please circle:

FEMALE - U9 / U12 / U14 / U17 - LU23 / LV40 / LV45

Address with postcode \_\_\_\_\_

\_\_\_\_\_ Local? - Y / N

Telephone \_\_\_\_\_ Vehicle Reg \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone number \_\_\_\_\_

**Disclaimer:** I understand that the sport of fell running often involves races over steep, hazardous and uneven terrain; sometimes in adverse weather conditions. I accept the hazards involved in fell running and acknowledge that I am entering and running this race at my own risk. I confirm that I understand that the organiser accepts no liability to me for any loss or damage of any nature to myself or my property arising out of my participation in this race.

Signed \_\_\_\_\_ Date \_\_\_\_\_

\*MUST BE SIGNED by Competitor/Parent or Guardian for runners U17 \*Min age to race is 6 years on the day

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