MANCHESTER AREA CCL – NEW ENTRIES FOR 2015/2016 SEASON

In partnership with APTECO; *Supported by:* COLGATE-PALMOLIVE'S DENTAL HEALTH UNIT, THE WATERS WILMSLOW HALF MARATHON, CITY OF MANCHESTER ATHLETICS *and* ATHLETE MATTERS

PLEASE DO NOT USE THIS ENTRY FORM FOR MEMBERS WHO WERE ENTERED LAST SEASON

CLUB NAME: _____

PLEASE ENTER BY RACE GROUP. LEAVE A GAP BETWEEN RACE GROUPS.

ENTITLE EACH AGE GROUP WITH RACE NAME, I.E. BOYS U11

AGES FOR ALL AGE GROUPS EXCEPT VETS: AS OF 31/8/15; VETS AS OF 10/10/15;* ***PLEASE HELP US BY COMPLETING BOTH DOB & AGE* *– YOU'RE ONLY DOING IT FOR YOUR CLUB WHEREAS WE ARE CHECKING ALL ENTRIES!*

PLEASE ENTER ONLY THOSE YOU FEEL CONFIDENT WILL COMPETE *– ADDITIONAL ENTRIES WILL BE ACCEPTED AS THE SEASON PROGRESSES.* ***PLEASE SEND YOUR ENTRIES BY MONDAY 21 SEPTEMBER 2015.***

LEAVE BLANK FOR LEAGUE USE ONLY	EA Number *must be completed*	FIRST NAME	LAST NAME	DOB	Age as of 31 Aug 2015 Except Vets = as of 10/10/15

Complete and send to: Brenda Bradshaw, 12 Heaton Drive, Hollins Village, Bury BL9 8BQ by Monday 21st September 2015 – *addressed envelope enclosed for your convenience but it needs a stamp.*

Submitted by: _____ ***Address:*** _____

_____ ***Post Code:*** _____

Contact Telephone: _____ ***email:*** _____

MANCHESTER AREA CROSS COUNTRY LEAGUE
NEW ENTRIES FOR 2015/2016 SEASON - continuation

CLUB: _____*Page* _____ *of* _____

FOR LEAGUE USE	EA Number *must be completed*	FIRST NAME	LAST NAME	DOB	Age as of 31 Aug 2015 Except Vets = as of 10/10/15