

# MANCHESTER AREA CROSS COUNTRY LEAGUE 2009/2010 SEASON

**SPONSORED BY  
REEBOK & CITY OF MANCHESTER ATHLETICS**

ENTRY LIST FOR CLUB: \_\_\_\_\_

**FEMALES - ENTER ONE GROUP PER SHEET AND TICK RELEVANT GROUP**

<b>FEMALES</b>	U11.....	U13.....	U15.....	U17....	SENIORS ..... <i>including Juniors &amp; Veterans</i>
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LEAVE BLANK	EA Number	FIRST NAME	LAST NAME	DOB	Age Match 1
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Complete and send to: Entries & Affiliations Co-ordinator: Julie Laverock, 55 Knightswood, Bolton BL3 4UU. Telephone: 01204 660227. e-mail: Julie.laverock@talk21.com. **REMEMBER TO INCLUDE YOUR CLUB'S AFFILIATION FORM OR ADVISE IF IT'S BEEN SENT SEPARATELY:**

TICK IF AFFILIATION FORM ENCLOSED \_\_\_\_\_; TICK IF AFFILIATION FORM SENT SEPARATELY \_\_\_\_\_.

**PLEASE ENTER ONLY THOSE YOU FEEL CONFIDENT WILL COMPETE - ADDITIONAL ENTRIES WILL BE ACCEPTED AS THE SEASON PROGRESSES. PLEASE SEND YOUR ENTRIES BY THE 10 OCT 2009.**

Kindly assisted by Colgate-Palmolive's Dental Health Unit