

MANCHESTER AREA CROSS COUNTRY LEAGUE 2009/2010 SEASON

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

ENTRY LIST FOR CLUB: _____

MALES - ENTER ONE GROUP PER SHEET AND TICK RELEVANT GROUP

MALES | U11..... | U13..... | U15..... | U17.... | SENIORS *including Juniors & Veterans*

LEAVE BLANK	EA Number	FIRST NAME	LAST NAME	DOB	Age Match 1
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					
21.					
22.					
23.					
24.					

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 OCTOBER 2009.

Kindly assisted by Colgate-Palmolive's Dental Health Unit