**SOUTH OF THE THAMES CCA ENTRY FORM**

**Name of Club** ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **M/F** \_\_\_\_\_\_\_\_\_\_\_\_

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|  | **Name** | **UKA Licence No.** | **Age on Race Day** | **Date of Birth** |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |
| **4.** |  |  |  |  |
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| **18.** |  |  |  |  |
| **19.** |  |  |  |  |
| **20.** |  |  |  |  |

Name and address of Team Manager

Telephone no:

Email address:

Signature Entry fee included for the sum of £ \_\_\_\_\_\_\_\_\_