



**BRITISH SCHOOLS CYCLING ASSOCIATION
OFFICIAL ENTRY FORM**



Event Title:	NATIONAL TIME TRIAL CHAMPIONSHIP
Date:	inc Northern Regional Championships* * MUST HAVE A MEMBERSHIP PREFIX 'N' Sunday 14th June 2009
Venue:	Sedgefield Parish Hall, Sedgefield, Stockton
Time:	1400
Closing Date:	31st May 2009
Promoters Name:	Colin WHITFIELD
Promoters Address:	17 Waltham Avenue STOCKTON -on -TEES
Postcode:	TS 18 5AE
Telephone Number:	01642 653 401
email:	
CATEGORIES:	U14 / U16 / 016
Entry Fees:	£5.00 National Championship £7.00 National & Regional Championships
Cheques Payable to:	Stockton Wheelers CC

PLEASE PRINT CLEARLY IN BLOCK CAPITALS:

Please enter me for: _____

Full Name: _____

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BSCA MEMBERSHIP NUMBER : if not a BSCA Member £1 surcharge (£2 Nationals)

sample BSCA Membership No is SC 334

Address: _____

Postcode: _____

Telephone: _____

Email: _____

Age on 1st September 08(Start of School Year): _____ Date of Birth _____

School: _____

ALL COMPETITORS IN BSCA EVENTS RIDE IN THE NAME OF THEIR SCHOOL

Club: _____

School / Club Colours: _____

Best Performance at this type of event since 1st January last year _____

I hereby Declare that the particulars submitted on this entry form are complete and correct
I agree to abide the rules of the BRITISH SCHOOLS CYCLING ASSOCIATION
and to accept the decisions of their Officials in all matters concerning this event

Signed: _____

Entry Fee enclosed: _____

TO BE SIGNED BY PARENT / LEGAL GUARDIAN:

I being the Parent / Legal Guardian of the entrant named on this form, hereby agree to his/her participation in the competition under the terms and conditions stipulated

Signed: _____ Date: _____

BSCA records are being updated onto Computer.

Members not wishing their details to be stored on Computer should contact the General Secretary.