



2010 REGISTRATION FORM

SERIES: 2010 RACE#: LOCATION:

Administration use only!

Name: _____

Address: _____

Phone: _____

Email: _____

Sponsor: _____

Category: _____

CATEGORIES

Elite	Sport	Novice
Expert	Sport Female	Novice Female
Expert Female	Sport Vet	Novice Vet
Expert Vet	Sport Vet Female	Novice Vet Female
Expert Vet Female		Beginner

PAYMENT \$120 for the whole series - or \$20 per race

PAYMENT TYPE: Cash: Cheque: Visa/MC: Interac:

RACE: ALL RACES: or 1: 2: 3: 4: 5: 6: 7: 8:

TOTAL: _____ Amount Paid: _____ Balance: _____

Please make cheques to: Mark Long, 282 East Puce Road, Lakeshore ON, N0R 1A0. • All Visa, Master Card and Interac payments must be done at Ambassador Bicycles, 1932 Ambassador Drive.

NAME

CATEGORY

NUMBER