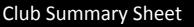


Club Manager's Signature

Athletics New Zealand Road Relay Championships





Rotorua 30 September 2017

PLEASE COMPLETE ONE FORM PER CLUB

THIS PAGE MUST BE COMPLETED AND EITHER EMAILED OR POSTED WITH CLUB'S ENTRY FEE CHEQUE

CLUB:																		
ENTRY SUMMARY																		
Number of teams @\$330 per team									Tota	l	\$							
Number of teams @\$245 per team									Tota	l	\$							
Number of teams @\$200 per team									Tota	l	\$							
								Total	to pay	y	\$							
PAYMENT													_					
Direct Cred	lit (please	indicat	e)]		OR		Che	que (p	leas	se in	dica	te)					
Direct Credit to: 0	3-1552-02	122086	-000				Make	chequ	ues pa	yab	le to	Lak	e Ci	ity At	thleti	ic Clu	b Inc	<u>,</u>
(put your club name as reference, please)							and p	ost, w	ith a d	copy	y of t	his c	com	plete	ed fo	rm, t	0:	
(put your club name as reference, please) and post, with a copy of this completed form, to: Road Relay Championships, Lake City Athletic Club,																		
form to: nzrrrotorua@gmail.com						РО Во	x 213	6, Rot	oru	a								
Club Waiver & R - In the event of a transferable or ref - We acknowledg	ny "Act o fundable.	f God"	conditi												•			our
participation We understand and accept that situations may arise during the event which may be beyond the immediate control of officials or organisers.																		
																	1 1	litv.
- Neither the orga	_		ors no	r oth	er pa	ırtıes	assoc	iated '	with t	he e	event	sha	all ha	ave a	anv r	espoi	ารเมเ	,,
 Neither the organized financial or otherway death which mighter from my club men 	anisers, th wise, whic t be susta	e spons th might ined by	t arise my clu	whet ub me	her c	or no	t by ne	egliger other p	nce, fr party o	om	any (dire	ct o	r ind	irect	loss,	injur	-
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Date