UEA INDOOR ROWING COMPETITION 4TH DECEMBER 2010

**Women’s Open £3 per competitor**

**Men’s Open**

**Mixed (4 men, 4 women)**

**ENTRIES CLOSE WEDNESDAY 24TH NOVEMBER 2010**

|  |  |  |  |  |  |  |  |  |  |  |
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| **Entry Form – For Team Event Entries**  **Contact Details** | | | | | | | | | | |
|  | **First Name:** |  | **Surname**: |  | | | |  |  | |
|  | **Address**: |  | | | | | | | |  |
| **Email Address:** | |  | | | | | **Postcode**: |  | |  |
|  | **Telephone :** |  | | | **Club :** |  | | | |  |
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| **Team Name:** |  |  | **Event** | |  | |
|  | **First Name** | **Surname** |
| **Competitor 1** |  |  |
| **Competitor 2** |  |  |
| **Competitor 3** |  |  |
| **Competitor 4** |  |  |  |  | |
| **Competitor 5** |  |  |  |  | |
| **Competitor 6** |  |  |  |  | |
| **Competitor 7** |  |  |  |  | |
| **Competitor 8** |  |  | **Cost** |  | |

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| --- | --- | --- | --- | --- | --- | --- |
| **Team Name:** |  |  | **Event** | |  | |
|  | **First Name** | **Surname** |
| **Competitor 1** |  |  |
| **Competitor 2** |  |  |
| **Competitor 3** |  |  |
| **Competitor 4** |  |  |  |  | |
| **Competitor 5** |  |  |  |  | |
| **Competitor 6** |  |  |  |  | |
| **Competitor 7** |  |  |  |  | |
| **Competitor 8** |  |  | **Cost** |  | |

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| **Competitor 7** |  |  |  |  | |
| **Competitor 8** |  |  | **Cost** |  | |

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| **Competitor 8** |  |  | **Cost** |  | |

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| **Competitor 7** |  |  |  |  | |
| **Competitor 8** |  |  | **Cost** |  | |

**Total Cost\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Important: Medical Recommendation** If on race day you feel unwell, or have recently been suffering from a virus, we recommend that you do not race. Indoor rowing races require maximal effort and the event organisers take no responsibility for illness or injury caused as a consequence. If you have any doubts you should medical advice prior to racing.

**Declaration**: I agree that all competitors entered on this form will be competing entirely at their own risk.

**Signed**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return the entry form by e-mail to [Catharine.bruce@gmail.com](mailto:Catharine.bruce@gmail.com) (note Catharine with ‘a’ in the middle!) by not later than Wednesday 24th November, and send payment by cheque made out to *C.Bruce* - along with a copy of the entry form - to Catharine Bruce, 21 St Leonard’s Road, Norwich, NR1 4BT. For any queries contact Catharine on 07785 321351.