

**VRYSTAAT MEESTERS
ATLETIEK**



**FREE STATE MASTERS
ATHLETICS**

***** 45TH FREE STATE MASTERS ATHLETICS TRACK & FIELD CHAMPIONSHIP ENTRY FORM *****
*****QUALIFYING EVENT FOR THE 2018 COMMONWEALTH GAMES*****

DATE: Saturday, 11 November 2017
VENUE: Mangaung Athletics Stadium, Bloemfontein

ENTRIES CLOSING DATE: Friday, 3 November 2017 – **NO LATE ENTRIES**

Name: _____ **Province/Club:** _____

Address: _____

_____ **Postal Code:** _____

Tel No: Home: _____ **Work:** _____ **Cell:** _____

E-mail address: _____

Date of Birth: _____ **Age Group:** _____ **M** **F**

ID NO:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

I declare that my date of birth is correct, that I take part at my own risk, that I shall not hold the organisers responsible for any occurrence that may arise from my participation and that I abide by the rules as laid down by SAMA, WMA, ASA and IAAF (where applicable).

ASA Licence No: _____ **Temporary Licence No:** _____

DATE: _____ **ATHLETE'S SIGNATURE:** _____

Please enter me for the following events:			
No.	Event	No.	Event
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

1 st event		R50-00	R	
2 nd event & thereafter	R40-00	X		R
Temporary Licence Number		R30-00	R	
Total amount paid				R

Banking Details:	Fax or e-mail entry & deposit slip to:	Contact Person:	Post entries to:
Free State Masters Athletics ABSA Account No: 4049302289 Branch Code: 334334	Fax: 086 535 8509 or E-mail address: vrystaatmeestersatletiek@gmail.com . Please use your name as reference.	Dinah Heymans Cell: 084 580 2903	Free State Masters Athletics P.O. Box 28025 Danhof, 9310

***** 45TH FREE STATE MASTERS ATHLETICS TRACK & FIELD CHAMPIONSHIP**********RELAY ENTRY FORM **********QUALIFYING EVENT FOR THE 2018 COMMONWEALTH GAMES*****

DATE: Saturday, 11 November 2017
VENUE: Mangaung Athletics Stadium, Bloemfontein

ENTRIES CLOSING DATE: **Entries will be allowed on the day of the competition!**

Contact person: _____ **Cell no:** _____

Age groups: U16, 16-17 yrs, 18-19 yrs, open (20-29 yrs), masters (30-99 yrs), no age restriction

Relay:	4x400m Women	Relay:	4x400m Men
Age group:		Age group:	
Team name:		Team name:	
Position 1:		Position 1:	
Position 2:		Position 2:	
Position 3:		Position 3:	
Position 4:		Position 4:	
Relay:	4x100m Women	Relay:	4x100m Men
Age group:		Age group:	
Team name:		Team name:	
Position 1:		Position 1:	
Position 2:		Position 2:	
Position 3:		Position 3:	
Position 4:		Position 4:	
Relay:	4x100m Mixed (2 men, 2 women)		
Age group:			
Team name:			
Position 1:			
Position 2:			
Position 3:			
Position 4:			

To receive medals an entry fee of R100-00 per team is payable:

Relays – medals	R100-00	X		R
Relays – no medals			R0-00	R
Total amount paid				R

Banking Details:	Fax or e-mail entry & deposit slip to:	Contact Person:	Post entries to:
Free State Masters Athletics ABSA Account No: 4049302289 Branch Code: 334334	Fax: 086 535 8509 or E-mail address: vrystaatmeestersatletiek@gmail.com . Please use your team name as reference.	Dinah Heymans Cell: 084 580 2903	Free State Masters Athletics P.O. Box 28025 Danhof, 9310