



BREWOD SCOUTS FUNDRAISERS - BREWOOD CYCLE CHALLENGE 2010

TEAM ENTRY FORM

Team Name: _____

	Name	Address	D.O.B	Contact Tel No.	Email Address
Team Leader >					
Rider 2*					
Rider 3*					
Rider 4*					
Rider 5*					
Rider 6*					

(* if applicable – each team should have a minimum of 2 and a maximum of 6 riders – single riders will be allowed but grouped in to teams by the Organisers based on riders selected route and age group (if possible) prior to the event - at least one rider in each team must be aged 16 years of age or older)

Route to be attempted:

Route Name	Approximate Length	Tick one
RED	16km (10m)	
WHITE	50km (30m)	
BLUE	100km (60m)	

How did you hear about the Brewood Cycle Challenge?

If you are entering as part of a group (school/cycle club/employer/etc) please tell us here:

Entry fee enclosed: £_____ (£10 per person aged 16 years or older, riders under 16 years are free of charge – please make cheques payable to “Brewood Scouts Fundraisers”)

I confirm, on behalf of myself (as Team Leader) and on behalf of the above Team, that I have read and understood the Rules and Regulations of the Event and agree to abide by them for the enjoyment and safety of all participants of the Brewood Cycle Challenge. [delete if not applicable] I also confirm that I have the permission of a parent/guardian of any Rider (aged less than 16 years) in my Team for them to take part in the event.

Signature: _____ Date: _____

Please send completed Entry Form and Cheque Payment by 4 June 2010 to:
Brewood Cycle Challenge, Brewood Scouts Fundraisers, c/o Broadway, Coven Road, Brewood, Staffordshire, ST19 9DF.

Entry Packs and Forms can be downloaded from the Fundraising page of www.2ndBrewoodScouts.org.uk