The Fell I JUNIOR I			Race No.					
Race:								
Full Name:	:							
Club:								
Date of Bir	th:				Age:			
Email Add	ress (optic	nal):						
Category. I	Please circ ear' (e.g. if	le below a aged 13 c	as approp on 31 <sup>st</sup> Dec	riate. Age then sele	categorie: ct U15).	s are defined	as 'age	
BOY:	U9B	U11B	U13B	U15B	U17B	U19B		
GIRL:	U9G	U11G	U13G	U15G	U17G	U19G		
Address:								
						e:		
Phone No:_								
Accompany	ing Adult /	Emergency	/ Contact:					
Phone No:_				_Vehicle F	Registration	:		
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Signed:					Date:			
Parent/Legal	Guardian (s	ignature not	required if F	Parental Con	sent Form is	s used)		
Phone No.	(if different	from Emerg	ency Contac	ct above):				
Parental C	onsent c	onfirmed	by (pleas	se tick). N	ot require	d if 18 on the	day.	
Race Entry	/ Form			Parental	Consent F	Form		

		S Associa NTRY FC	·	Race No.					
Race:									
Full Name	e:								
Club:									
Date of Bi	irth:			Age:					
Email Add	dress (opti	onal):							
		cle below f aged 13 c				s are defined	d as 'age		
BOY:	U9B	U11B		U15B	-	U19B			
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Parent/Lega	ll Guardian (s	signature not	required if F	Parental Cor	nsent Form is	s used)			
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Parental Race Enti		confirmed	l by (pleas	,	ot require Consent F	d if 18 on the	e day.		