



RACE FOR Victory

Physical Disabled Cyclists:
Contact C Branco 083 267 3009
for free entry

Champion Chip Number:

DISTANCE: RACE A - 101KM R180
 RACE B - 72KM R130
 RACE C - 54KM R100

CSA Non CSA Members: Day License Fee R35

ENTRY FORM

 NO CHIP, NO TIME, NO RESULT
 www.championchip.co.za

Surname:
 First Name:
 ID Number: Sex - M F
 Postal Address: Date of Birth: 19 Age:

Postal Code:

Tel.Work Number:
 Tel Home Number:
 Tel Mobile Number:
 E mail address

Emergency Contact Person:
 Emergency Tel Number:
 Medical Aid:
 Medical Aid Number:

Cycling Club:
 Membership Number:

Valid CSA Number: = All people in possession of a valid CSA License card. This is not your Club or Pedal Power Number.

Valid CSA Licence Number:
 Team Name:

- | 101KM | 72KM | 54KM |
|--|--|---|
| CSA LIC Elite Men & U23 <input type="checkbox"/> | CSA LIC U16 Men <input type="checkbox"/> | CSA LIC U16 Ladies <input type="checkbox"/> |
| CSA LIC Vets Men (30+) <input type="checkbox"/> | CSA LIC Junior Ladies <input type="checkbox"/> | CSA LIC U14 Boys <input type="checkbox"/> |
| CSA LIC Vets Men (40+) <input type="checkbox"/> | Open/Seeded <input type="checkbox"/> | Open/Seeded <input type="checkbox"/> |
| CSA LIC Vets Men (50+) <input type="checkbox"/> | Tandem <input type="checkbox"/> | Tandem <input type="checkbox"/> |
| CSA LIC Junior Men <input type="checkbox"/> | Mixed Tandems <input type="checkbox"/> | Mixed Tandems <input type="checkbox"/> |
| CSA LIC Elite Ladies <input type="checkbox"/> | | |
| CSA LIC Ladies (40+) <input type="checkbox"/> | | |
| Open/Seeded <input type="checkbox"/> | | |
| Tandem Men <input type="checkbox"/> | | |
| Tandem Mixed <input type="checkbox"/> | | |

RACE PACK COLLECTION POINT
 NORTH SOUTH

T-SHIRT SIZE:
 XXL Large
 XL Large
 Large
 Medium
 Small

Enter Our Special Team Club Event
 Terms & Conditions Apply

NOTE: TANDEM ENTRY: Separate entry fee & form must be completed by each rider and stapled together with ID number of co-rider

Tandem / Surname:
 Tandem/Ride Together ID Number:
 Pay by: Cheque: Electronically: Credit Card:
 Credit Card Holder:
 Credit Card Number:
 Expiry Date: / / CVC Number: VISA: MASTER:
 Entry Fee:
 Donation to Cerebral Palsied and Physically Challenged Children Amount
 Total:

Waiver: Any cyclist who enters using this entry form agrees to the terms and conditions outlined by the organisers of the event and Rand Water Zwartkopjes Pumping Station. Unless otherwise specified the Indemnity Form reads as follows: All entrants participates entirely at their own risk and agree that they shall have no claim whatsoever against the organising body, helper or sponsor in respect of any injury, loss or damage that participants may suffer arising from any injury to that person or property, caused directly or indirectly by the negligence, albeit gross of one or more of the aforementioned parties.

Date: / / Participant: Parent if U/18: