



Event Title:	BSCA National Roller Championship inc West Midlands Region Roller Championship
Date:	SUNDAY 14th MARCH 2010
Venue:	Friary Grange Leisure Centre, Lichfield
Time:	10.00am
Closing Date:	27 th February 2010
Promoters:	Friary Grange Leisure Centre, Eastern Avenue Lichfield Staffs WS13 7EW
Telephone Number:	01543 308842
email:	friary.grange@lichfielddc.gov.uk
CATEGORIES:	U8/U10/U12/U14/U16/016
Entry Fees:	£6-00 National No EOL £10-00 National + Reg No EOL
Cheques Payable to:	Lichfield District Council

PLEASE PRINT CLEARLY IN BLOCK CAPITALS:

Please enter me for: Age Group Please circle National National
 (please indicate) event entered Only &
 Regional

Full Name: _____ **Boy** **Girl**

BSCA MEMBERSHIP NUMBER : CLUB OR PRIVATE MEMBER NUMBER

if not a BSCA Member £1 surcharge (£2 for Nationals)

Address: _____

Postcode: _____

Telephone: _____ Email: _____

Age on 1st September (Beginning of School Year): _____ Date of Birth _____

School: _____

ALL COMPETITORS IN BSCA EVENTS RIDE IN THE NAME OF THEIR SCHOOL

Club: _____

School / Club Colours: _____

Best Performance at this type of event since 1st January last year _____

I hereby Declare that the particulars submitted on this entry form are complete and correct .
I agree to abide the rules of the BRITISH SCHOOLS CYCLING ASSOCIATION and to accept the decisions of their
Officials in all matters concerning this event

Signed: _____ Entry Fee enclosed: _____

TO BE SIGNED BY PARENT / LEGAL GUARDIAN:

I being the Parent / Legal Guardian of the entrant named on this form, hereby agree to his/her participation in the competition
under the terms and conditions stipulated

Signed: _____ Date: _____

BSCA records are being updated onto computer. Members not wishing their details to be stored on computer contact the General Secretary.

Photography/Filming may take place during activity programme for promotion and publicity of the scheme.
Please tick box if you **do not** wish your child to be photographed or filmed