



2010 Casey Cycling Festival 6 Hour

Saturday February 27th 2010

School /Organisation: _____

Team Name: _____

Contact Details: Name: _____

Race Day Phone: _____

Fax: _____

Email: _____

Postal Address: _____

Class:

- Primary Grade 5
- Primary Grade 6
- Female Secondary (Yr 7 - 12)
- Junior Secondary (Yr 7 - 9)
- Senior Secondary Yrs (10 - 12)
- Community
- Veteran Community (Average Age 35 and over)

Entry Costs \$125 per team

Tax Invoice

ABN 62 471 372 864

Enclosed is a Cheque for \$ _____ made payable to Casey Cardinia HPV & Cycling Club Inc

Signed Principal: _____

Or

Signed Team Owner/Manager: _____

Entries Close 14th February
1 entry form per team

"Competitive ON the track, Cooperative OFF it!"

www.cchpvcc.org.au



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Names of 2 Volunteers per team to help with Event Management

Name: _____

Phone: _____

Email: _____

Name: _____

Phone: _____

Email: _____

Please Return registration forms with payment to
Event Manager
Casey Cardinia HPV & Cycling Club Inc
PO Box 575
Beaconsfield 3807