

CSRC 19th May 2007 – Entry Form

Club		Contact name		Contact no	
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Eights – Event no:				
	Name	DoB	Lic no	Clashes
Bow				
2				
3				
4				
5				
6				
7				
Str				
Cox				

Eights – Event no:				
	Name	DoB	Lic no	Clashes
Bow				
2				
3				
4				
5				
6				
7				
Str				
Cox				

Fours / Quads – Event no:				
	Name	DoB	Lic no	Clashes
Bow				
2				
3				
Str				
Cox				

Fours / Quads – Event no:				
	Name	DoB	Lic no	Clashes
Bow				
2				
3				
Str				
Cox				

Fours / Quads – Event no:				
	Name	DoB	Lic no	Clashes
Bow				
2				
3				
Str				
Cox				

Fours / Quads – Event no:				
	Name	DoB	Lic no	Clashes
Bow				
2				
3				
Str				
Cox				

Pairs / Doubles – Event no:				
	Name	DoB	Lic no	Clashes
Bow				
Str				
Cox				

Pairs / Doubles – Event no:				
	Name	DoB	Lic no	Clashes
Bow				
Str				
Cox				

Pairs / Doubles – Event no:				
	Name	DoB	Lic no	Clashes
Bow				
Str				
Cox				

Pairs / Doubles – Event no:				
	Name	DoB	Lic no	Clashes
Bow				
Str				
Cox				

Scullers				
	Name	DoB	Lic no	Clashes
1				
2				
3				
4				
5				

Aquajogs				
	Name	DoB	Lic no	Clashes
1				
2				
3				
4				
5				

- Notes:**
1. Please ensure you have indicated all event and boat clashes.
 2. Veterans please fill in your date of birth and veteran category.
 3. **I certify that all the competitors named are amateur members of this Club, which is affiliated to the SARA, or of the Clubs shown against their names, such Clubs being affiliated to and are eligible to compete in the events for which they are entered. The Club(s) further certifies/certify that each competitor will race in a boat which complies in all respects with the SARA Water Safety Code.**

Signed..... Position