

**46th Shay Elliot Memorial Race
27 April 2003
Entry Form**



To: Bray Wheelers Cycling Club

Please accept the rider(s) listed below representing:

Name of Team/Club

	Rider Name	Full Address (Prize Money send here)	Category	Cycling Ireland Licence No. & UCI Code No.
1	Forename	Address	Cat	Cycling Ireland
	Surname			UCI Code
2	Forename	Address	Cat	Cycling Ireland
	Surname			UCI Code
3	Forename	Address	Cat	Cycling Ireland
	Surname			UCI Code
4	Forename	Address	Cat	Cycling Ireland
	Surname			UCI Code
	Reserves *			
1	Forename	Address	Cat	Cycling Ireland
	Surname			UCI Code
2	Forename	Address	Cat	Cycling Ireland
	Surname			UCI Code

***NOTE: Teams are reminded that the maximum number of riders per team/club is four. Additional riders must be entered on a separate form.**

A Team Manager may specify up to two reserve riders who can be "switched" in place of any of the four riders entered above in accordance with UCI regulations. In such cases, replacement riders must have been listed as Reserves above, and will only apply to teams showing a minimum of four riders on the originally published list of riders.

Entry fees for the event are Euro 20 per rider. For UK based riders, the entry fee is STG£13 per rider.

I the undersigned certify that the information on this form is correct and have signed hereto to signify that the rider's names on this form are in agreement with this entry, and will compete in accordance with the current UCI and Cycling Ireland Technical Regulations. I list the rider(s) in order of preference, but further agree to abide by the Race Promoters decision with regard to selection, should the Promoter be unable to select all of the listed riders. Those riders not selected may be listed as reserves. I also enclose details of my riders for use by the Promoter for race press and publicity purposes.

Total Entry Fees Enclosed:	€20 of STG£13 per rider
Signed:	
Date:	
Team Managers Name:	Full Name
Team Managers Licence Number:	
Address:	Full postal address
Telephone Number:	Include full International dialing codes if applicable
Fax Number:	Include full International dialing codes if applicable
E-mail address:	

Completed forms should be returned to Jane Martin,