

VICTORIAN A4DE NOMINATION FORM

Senior and Junior Trophy Teams and Team Managers

Name:

Email Address:

(NB. It is compulsory for all riders to have email access – all A4DE Correspondence will be via email)

Phone: _____ Date of birth: _____

Mob. Phone: _____ Fax: _____

Rider's Bike/Capacity: _____

Name of Supporter & PH _____

Name of Supporter & PH _____

Have you been to a A4DE day before ? _____

If yes,
where/when/results? _____

Nominating for: Senior Trophy Team / Junior Trophy Team.
(please circle which one)

Return your form via email to Denise Hore at dengardc@dcsi.net.au or post to P.O. Box 13 Officer Vic 3809.

NOMINATIONS to be received by NO LATER THAN 15th March
Forms received after this date may not be considered.

Name of Team Manager nominating :

_____ Trophy Team/ Junior Trophy Team (circle choice)

Contact No. _____

Vic Jury Representative nominating :

Name: _____ Contact No. _____

Officials Licence No./Expiry/Level
