

SOUTH ISLAND 2010 ENTRY FORM *(part one)*

RACE DATE Saturday 6 March 2010



Fax 09 355 1489

COMPANY DETAILS

Registered Name: _____

Company Physical Address: _____

Company Postal Address: _____

COMPANY REPRESENTATIVE DETAILS (all information will be sent through this person)

Name: _____ Email: _____

Phone: (____) _____ Cell: (____) _____

Position within company: _____

TEAM TYPE

(please note that each separate team must complete a form, even if they are within the same company)

Corporate - all 4 members must be permanent, full time employees of the company.

Corporate Classic Division – at least one team member must be of the opposite sex.

Informal – at least 2 team members must be permanent full time employees of the company. The balance of the team may comprise part time employees or contractors or company associates, including suppliers and/or consultants. (confer with Cure Kids staff if unsure)

Informal Classic Division

ENTRY FEE

\$10,625 per team

First \$5,000 + GST will be invoiced upon completion of Entry Form 1. Remaining balance of \$5,000 minimum to be paid to Cure Kids before 5 March 2010. Full entry fee must be paid by this date to compete in race.

Please make cheques payable to Cure Kids Limited.

PLEASE NOTE THAT THERE ARE NO REFUNDS

OTHER INFORMATION

- Further information and updates will be emailed to your company representative.
- Further information will also be available from our website: www.curekids.org.nz
- All participants will have to abide to the Race Rules and will have to sign a waiver form prior to the race seminar event and actual race.

CONTACTS

Josie Spillane, Funding Manager, South Island
Alan Nelson, Race Director

(027) 221 4334
(0274) 821 562

As company representative, I confirm I have read and understood the information in this entry form and agree to pay invoiced amount of \$5,000 + GST made payable to Cure Kids Limited within a fortnight of receiving invoice.

Name

Signed

Date

SECURE YOUR TEAM'S PLACE IN THE CURE KIDS GREAT ADVENTURE RACE – RETURN THIS FORM TODAY!
FAX 03 4092324 or email to j.spillane@curekids.org.nz