

ENTRY FORM

ALPINE TOUR 2016

A Fundraising Event for the Steven Walter Children's Cancer Foundation.
Saturday 5 March 2016 to Tuesday 8 March 2016

Return to: Alpine Tour 2014
18 Mawson Street, COOMA NSW 2630

Telephone Kathy Manthey, 0438523982
Email: mantheykathy@yahoo.com.au
kathy.lastmax@bigpond.com

Closing Date: 30 January 2016
Deposit of \$100 payable by 6 January 2016 to confirm booking.

Riders Name: .....

Pillion Name: .....

Address: .....

..... P/code .....

Accommodation, Breakfast and Dinner twin share: \$500.00
Accommodation, Breakfast Dinner Single Supplement: \$650.00
Cooma accommodation, diner and Breakfast \$100.00
(Please advise any dietary requirements) \$.
Donation:
Total Paid: \$.

Cheques payable to Cooma AAR
Or Direct Deposit to Cooma AAR BSB 032 720 Account 199 333
Please use your name as the reference and kindly email us confirming your payment.

You will be required to sign the Indemnity Statement below prior to participating in the ride.

INDEMNITY STATEMENT

The entrant and pillion undertake not to hold the Steven Walter Children's Cancer Foundation or any representative or sponsor responsible for any damage or theft of machinery or possessions or any bodily injury sustained during the course of the Tour.

I, as rider, also declare that I am the holder of a current motorcycle licence and that the motorcycle I will be riding in the Tour will be fully road registered.

Entrant Signature ..... Pillion Signature .....

Please sign and return form with payment or evidence of direct debit to bank account
Cheques Payable to Cooma AAR