This Form must not be used for a TEAM ENTRY and must be retained by Sports holding Body for one year.

## SCOTTISH ATHLETICS LIMITED
# OFFICIAL ENTRY FORM

**To the committee of the..... Meeting to be held on.....**

Please enter me for the following:-

Event…… No: …….
Event…… No: …….
Event…… No: …….
Event…… No: …….
At your Meeting on ……..
For which I enclose Entry Fee of……..

(N.B.- The Committee shall not accept any entry not accompanied by the appropriate fee and have also the right to refuse any entry without being bound to assign a reason).

**S.A. Ltd Registration No:_____**
**Or SGA Registration No:_____**

To be completed if Entering Handicap Events

| NAME OF MEETING | Date | EVENT | HANDICAP ALLOWANCE | HEAT POSITION | FINAL POSITION |
|---|---|---|---|---|---|
| The Last THREE OPEN HANDICAP MEETINGS in which you actually competed | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Your last performance at each of the events(Handicap or scratch) (You must enter details) | | | | | |
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| | | | | | |
| | | | | | |
| The last event won by you at, or near, the events entered | | | | | |
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| | | | | | |

I agree to submit to the jurisdiction of the S.A. Ltd On all matters relative to this entry and to abide by The B.A.F. Laws & Rules for Competition.

I further agree to submit myself if required for a Doping test.

I declare that I am an amateur as defined by S.A. Ltd Rules and that the particulars are complete and Correct in every detail.

I hereby declare that I am medically fit to compete and that I will not hold the organisers responsible for any injury, illness or loss to my person or property caused.

Name……
(Block Letters)

Address…….
……..
……..
……..
Date of Birth…….
Club……..
Club Colours…….

Signature.....

**To be completed if entering Scratch Events: My best performance this year at the events entered is:-**

| MEETING | DATE | PERFORMANCE | BEST EVER PERFORMANCE |
|---|---|---|---|
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