VIII 10 KMS PORT DE PALMA

17/03/2019 – 11.00 HOURS

INSCRIPTION SHEET

SURNAME	NAME

BIRTH DATE (dd/mm/yyyy)	SEX:				PASSPORT/ID-CARD
		M		F	

CLUB

ADDRESS, street, road, square,	Number

POSTAL CODE	TOWN, VILLAGE, etc.	COUNTRY

MOBILE-PHONE	FAX	E-MAIL

T-SHIRT (select size)	S	M	L	XL

Until 30/11/2018	01/12/2018-31/12/2018	01/01/2019-28/02/2019	01/03/2019–15/03/2019	AFTER INSCR. CLOSURE	
12 €	**14 €**	**16 €**	**18 €**	**20 €**	**€**

Own Chip Núm:							

Rental Chip 3 Euros	
Purchase chip 20 Euros	**€**

TOTAL	**€**

	DATE AND SIGNATURE
I declare myself physically and psiquically apt to participate in this event and I do understand and accept the competicion rules	

PAYMENT:

☐ With credit card (VISA, MASTERCARD, EUROCARD, 6000)

CARD NUMBER																EXP. DATE	SIGNATURE

☐ Bank transfer to: **CLUB MARATHON MALLORCA**:
BANKIA: IBAN/ACCOUNT NUMBER: ES04-2038-3270-0260-0018-3927
BIC: GBMNESMMXXX
Adjoining copy of bank receipt

SEND BY FAX TO: (0034) 971-465023