



VETERANS TIME TRIALS ASSOCIATION
East Anglian Group four distance competition claim form

Group Recorder: **Tony Clarke**
 Address: **4 Gunnell Close**
Milton
Cambridge
CB24 6ZB
01223 440399

Name: _____ Club: _____ Date of birth: _____
 Address: _____ Male/female: _____

Postcode: _____ Telephone: _____

Claim for season's best rides. Indicate bike or trike in the B/T column. Result sheets *must* accompany any claims. Last qualifying event 15th October. Club events do not count

Dist/Time	Event	Date	Time/Dist	B/T	Age	Standard	Checked
10							
25							
50							
100							

Group Recorder's use only	
4 distance plus (mph)	
Total plus:	

Claimant's signature: Date: (Unsigned entries will not be accepted)
 Results verified by: (Group Recorder)

CLAIMS MUST BE WITH THE GROUP RECORDER NO LATER THAN 18th OCTOBER