



VETERANS TIME TRIALS ASSOCIATION NATIONAL B.A.R. & THREE DISTANCE COMPETITION CLAIM FORM

Group Recorder _____
Address _____

Name	Club	Group	
Address	Male/Female	Date of Birth	
Postcode	Please enter me for: B.A.R. <input type="checkbox"/> Three distance competition <input type="checkbox"/> <small>(Place tick in either or both boxes)</small>		
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
25							
50							
100							
12 Hr							
				Group Recorder's Use Only			
				BAR Plus (MPH)			
				Three Distance Plus (min. sec)			
				Total Plus			

Claimant's signature Date (Unsigned entries will not be accepted)

Results verified by (Group Recorder)

Claims must be with the National Recorder by the 1st of November and the Group Recorder no later than the 18th of October