



La Trans'roller Rollerski event

Pontarlier
Oye et Pallet - Malbuisson - Mouthe
10th & 11st September 2011
Individual entry form



TRANS'ORGANISATION
BP 20126 – Espace Lamartine
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Miss/Mrs Mr.

Surname _____ (Block letters please)

First Name _____

Street _____

Town _____ Post Code _____ Country _____

Telephone _____ Birth Date ____ / ____ / ____ Nationality _____

E-mail : _____

Events :

- Montée du Larmont 25 km race - Oye et Pallet
 17 km race - Malbuisson

FFS licence N°: _____

FFS Pts : _____

Club : _____

Committee : _____

Attention : Skiers must possess a valid FFS licence, on the contrary, he must pay 10 € for a “ticket course”.

For skiers who wish to participate on both days, a special price is made. Please contact us.

| | 25km race | | 17km race | | Montée du Larmont | |
|---|-----------|--------|-----------|--------|-------------------|------|
| | Licence | no Lic | Licence | no Lic | | |
| Basic entry fee until 13/08/2011 | 28 € | 38 € | 18 € | 28 € | 12 € | 22 € |
| From 14/08/2011 until 03/09/2011 | 33 € | 43 € | 23 € | 33 € | 14 € | 24 € |
| On line registration only! From 04/09/2011 until 07/09/2011 | 38 € | 48 € | 28 € | 38 € | 17 € | 27 € |

Closing date for entries sent by POST: Saturday, September 03rd, 2011

Closing date for Internet entries: Wednesday, September 07th, 2011

MEDICAL CERTIFICATE

Fill out by Physician or join a medical certificate of less than one year
or a copy of the ski licence.

Date of appointment: __ / __ / __

I certify, Doctor _____

That Mrs / Mr. _____

Is apt to participate in a rollerski event on a
competitive level.

Physician's Stamp and Signature

PARENTAL AUTHORIZATION

(Mandatory for participants under 18 years old)

Mrs or Mr.* father, mother, tutor authorise my daughter, my son*
..... to participate in la Trans'roller under the responsibility of Mrs or
Mr.* **present on the race**

I confirm to be in full knowledge and acceptance of the race regulations.

Location: Date

*(Please circle correct answer)

Signature (mandatory)

I would like to use the organised transport service to return to Pontarlier after the
race. The shuttle bus is free of charge for all participants.

Please find:

My entry form

Medical certificate delivered within 1 year

Entry fee (see page 1)

Amount paid _____ €

by cheque (to Trans'Organisation)

to Bank Account

Transjurassienne Crédit Mutuel : Account with institution - field 57 (option A)

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by Credit Card Visa or Master Card N°: _____

Expiration date __ / __ / __

3 last numbers on the back of your card ___ **Signature (mandatory) :**

Surname _____ (en majuscules)

First Name _____

Location _____

Date __ / __ / 2011

In paying the race entry fees, the participant confirms to be in full knowledge
and acceptance of the race regulations.

ATTENTION: ALL INCOMPLETE REGISTRATIONS WILL BE REFUSED