

The Bendigo Bank Great Wheelbarrow Race 2023

Registration Form

TEAM NAME:			
PARTICIPANT D	ETAILS		
Name			
Date of birth			
Address			
Email			
Contact phone			
OVER 18 UNDER 18	Parent / Guardian Consen Name:	t	
Media consent Yes No	Signature:		
Name	ONTACT DETAILS		
Contact phone			
Relationship			
DECLARATION:	·		
Please tick appi	ropriate boxes:		
	rmation supplied to me by the abide by all of the competition eir representatives).	= :	
members, volunteers, ot event and the servants,	mnify, release and render ha ther corporations and bodies in agents, representatives and c r, or claim in relation thereto a	nvolved or otherwise engaged officers or any of them for an	in promoting or staging the y loss, damage, or personal
Shire Council's Custome	ed to Mareeba Shire Council, l or Service Centre or emailed to rm with them on Friday, 12 M	o rochelleh@msc.qld.gov.au.	
Signature		Date	