2020 "VHA 110" ENTRY FORM

NAME First		
Surname		
<u>ADDRESS</u>		
State		Postcode
LOFT ADDRESS & N	NAME (IF DIFFERENT)	
CLOCK TYPE e.g. Be	enzing electronic or STB Manual	
EMAIL ADDRESS		
MOBILE/PHONE N	<u>UMBER</u>	
NUMBER ENTRY P	<u>OSITIONS</u>	
AMOUNT DEPOSIT	<u>'ED</u>	\$
Cost \$100 each ent	try position.	
·	EQUES and CASH ACCEPTED	
Account Name		
Bank BSB	ANZ BANKING GROUP	
	013 141 906670537	
		ered deposits and Mobile Number at bank iation.
	d once your Entry Form and payment MS will be sent to you. You must ma	has been accepted. A Reference Number will ke payment within 7 days.
NOTE: Please refer	to detailed race Terms & Conditions	available at WWW.vha.asn.au/VHA110
By signing this appl Terms & Condition	•	e agreed to and will comply with all race
	application to Email: VHA110@mail.com/ Stanley Street, Black Rock. Vic. 3193	
Signed		
Date		