**Entry Form**

**Team/Club Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |
| --- | --- | --- | --- |
| **4 Riders Per Team** | **Name** | **UCI Code** | **Licence Number** |
| **Rider 1** |  |  |  |
| **Rider 2** |  |  |  |
| **Rider 3** |  |  |  |
| **Rider 4** |  |  |  |

**Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Accommodation is €52 per person / per night (Dinner, Bed & Breakfast) .**

**Booking through:** [**res@treacyswestcounty.com**](mailto:res@treacyswestcounty.com)

**Completed entry forms with €50 euro per rider should be returned by 30th June to ; -**

**Alice Sherratt, 4 Roselawn Glade, Castleknock, Dublin 15. Ireland**

**Or e mail** [alicesherratt@gmail.com](mailto:alicesherratt@gmail.com)

**Race Details on www.juniortourofireland.com**