

SMUGGLERS' NOTCH PRIMITIVE BIATHLON
ENTRY FORM

NAME: _____

ADDRESS: _____

CITY/TOWN: _____

STATE/PROVINCE: _____

COUNTRY: _____ ZIP/MAIL CODE: _____

DAYTIME PHONE #: _____ EVENING PHONE #: _____

E-MAIL ADDRESS: _____

DATE OF BIRTH: ___/___/___ UNDER 18 REQUIRES PARENT OR GUARDIAN
PERMISSION AT CHECK-IN.

FOR ADVANCE ENTRIES ONLY:

PREFERRED DAY: SAT ___ SUN ___

PREFERRED TIME: _____ (BETWEEN 8 AM AND 2 PM)

PLEASE NOTE: WE WILL ASSIGN STARTING TIMES AS CLOSE AS POSSIBLE TO THOSE
REQUESTED; PRIORITY WILL BE JUDGED BY DATE OF RECEIPT OF ENTRY.

IF YOU ARE COMING IN A GROUP, PLEASE SEND ALL ENTRIES IN A SINGLE ENVELOPE, AS WE WILL
ENDEAVOR TO SCHEDULE YOUR GROUP IN A CONSECUTIVE ORDER.

IN AN EFFORT TO SAVE ON POSTAGE, WE WILL NO LONGER AUTOMATICALLY MAIL THE RESULTS
TO ALL ENTRANTS. AS ALWAYS, RESULTS WILL BE POSTED ON OUR WEBSITE—
WWW.PRIMITIVEBIATHLON.COM. IF YOU'D LIKE TO RECEIVE A COPY OF THE RESULTS BY 'SNAIL-
MAIL', PLEASE PLACE AN 'X' IN THE BOX BELOW.

IN THE EVENT OF A QUESTION REGARDING THE RULES OR RESULTS, THE DECISION OF THE OR-
GANIZERS WILL BE FINAL.

FEE: ADVANCE - \$10.00 U.S.

DAY OF EVENT - \$15.00 U.S.

CHECK PAYABLE TO: PRIMITIVE BIATHLON

SEND TO: PRIMITIVE BIATHLON

PO BOX 276

JEFFERSONVILLE, VT 05464 USA