

## XXVI HALF MARATHON CIUDAD DE PALMA 18/03/2018 - 11.00 HOURS

## **INSCRIPTION SHEET**

SURNAME	SURNAME													NAME					
BIRTH DATE (dd/mm/yyyy) SEX:												PASSPORT/ID-CARD							
• • • • • • • • • • • • • • • • • • •												F							
CLUB																			
ADDRESS, street, road, square,														Number					
POSTAL CODE	POSTAL CODE TOWN, VILLAGE, etc.													COUNTRY					
MOBILE-PHONE FAX E-MAIL																			
T-SHIRT (select size)												S		Μ	L	_	XL		
						1/01/2018- 28/02/2018				01/03/2018- 16/03/2018									
18 € 20 €				22 €				-	25€				30 €			€			
Own Chip										Rer	Rental Chip			3 Euros		£			
Núm:										Pur	Purchase chip			20 Euros			€		
TOTAL															£				
DATE AND SIGNATURE           I declare myself physically and psiquically apt to participate																			
in this event and I do understand and accept the																			
competicion rules																			
PAYMENT:																			
With credit card (VISA, MASTERCARD, EUROCARD, 6000) CARD NUMBER EXP. DATE SIGNATURE																			
CARD NUMBE	≺   _											EXP.	DA	NIE	SIG	NATU	KE		
<ul> <li>Bank transfer to: CLUB MARATHON MALLORCA: GRUPO BANCO MARE NOSTRUM IBAN/ACCOUNT NUMBER: ES11 0487 2007 7620 0000 8077 BIC: GBMNESMMXXX Adjoining copy of bank receipt</li> </ul>																			

## SEND BY FAX TO: (0034) 971-465023