

ATHLETE SUPPORT FUND APPLICATION.

NAME.....

ADDRESS.....

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.....

.....

AGE GROUP.....

COMPETITION ENTERED.....

COMPETITION DATE.....

COMPETITION ENTRY FEE.....

IS AN OVERNIGHT STAY INVOLVED.....

SUPPORTING STATEMENT:-

PLEASE RETURN TO :- MARTIN WILLIAMSON
Chairman. Newquay and Par A.C.
Goviley Major Farmhouse
Tregony
Truro
TR2 5TT