


Vulintaba Extreme

MTB 17km (Sat)	<input type="checkbox"/>	R 100	
MTB 55km (Sat)	<input type="checkbox"/>	R180 + R35, if not licensed with CSA	
MTB 75km (Sat)	<input type="checkbox"/>	R250 + R35, if not licensed with CSA	
Road 20km (Sun)	<input type="checkbox"/>	R 100	
Road 60km (Sun)	<input type="checkbox"/>	R220 + R35, if not licensed with CSA	
Road 100km (Sun)	<input type="checkbox"/>	R280 + R35, if not licensed with CSA	

First Name		Surname	
ID/Passport		Date of Birth	
Gender		Email	
Telephone (H)		Cell	
Emergency Contact Person		Emergency Contact Number	
Country		Province/District	
Town		Postal Code	
School		CSA License No.	
Cycling Club			
Medical Aid		Medical Aid No.	
Blood Type		Allergies	
Doctor		Telephone	
Medical Conditions			

Guardian Consent, if younger than 18 yrs.

Name & Surname	
Signature	

By signature, you accept the terms and conditions as well as the general indemnity as per Roag Online Entries
(www.roag.co.za)