

Celtic Challenge 2012

Registration Form

Team Name:

Rowing Club:

Contact Name:.....

Address:

.....

.....Post Code:

Tel No.:

Mobile No. :.....

E-mail:.....

Experience of team at Sea Rowing:

Please fill in Form in block capitals – thank you

Return form to:

**Celtic Challenge
20 Rhoshendre
Waunfawr
Aberystwyth
SY23 3PT**

Or to e-mail: info@celtic-challenge.org.uk

Entry form and details of *Celtic Challenge 2012* will be sent out after receipt of Registration Form