



Maldivian **HALF
MARATHON
CHAMPIONSHIP**

Friday, 02 October 2015

Final Entry Form

Personal Details

Name: _____

Date of Birth: _____ ID / PP. No: _____

Permanent Address: _____

Present Address: _____

Mobile No: _____ Res. Phone No: _____ Office Phone No: _____

Entry

Half Marathon 10K 05K
Club / Team Individual

Club / Team: _____

Manager / In Charge: _____

Contact: _____ (Mob) _____ (Off)

Signature & Stamp (Team)

Submit (email or fax) this form with copy of ID card or Passport on or before 17 September 2015, 1200hrs

for more information
call: 9762449,7675308

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web: www.athletics.org.mv



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