

MMTG Throws Fest 2018.

(Organised By : Midland Masters Throwers Group (**MMTG**)).

DERBY-MOORWAYS STADIUM, DE24 9HY.

Saturday 8th. September 2018 (UNDER UKA/WTC Rules).

ENTRIES CLOSE: - WED 8th. AUG. 2018 (NO LATE ENTRIES).

ENTRY FEES: - £8 for first event-£5 each additional event-(MAX Event total=11)

M/W 20 or less: -entries will be half price PLUS £5.00

First Event 10.00 am.

PAY ON LINE or Cheque preferred payable to “MMTG”

PAID ON LINE? SUBMIT COMPLETED FORM TO MMTG SECRETARY.

SEND ENTRIES TO: - The Secretary (MMTG), Hill Top Farm, OverKellet, Carnforth, LA6 1DG

(ENCLOSE A5-SAE if using form only for instructions etc.)

Five yr. Age Bands:- M/W13, 15. M/W 17, 19.**, M/W, M/W 30 to M/W 100+
PLEASE PUT A “CROSS” IN APPROPRIATE BOX IF ENTERING EVENT.**

One Handed Hammer	Kugel-Schocken	
Greek / Igmánd Discus	Stone Duathlon: 25/12.5kg (ALL W&M60+)	
Slingball	Club (Grenade)	
Heavy Hammer	Stone Duathlon:50/25kg.(M20-M55 inclusive)	
Iron Slingball	56lb. Hammer-w-turn	
56lb.Hammer	Hammer of “ IGMÁND”	

Women should read “56 lb. Putt”, as “28 lb. Putt.”-etc. Similar applies to M60+ and younger M/W,-see ** above. Restrictions to some events for M/W13,15,17. Please use capital letters in the following:-(SORRY –No Unattached Athletes)

MALE FEMALE

Surname..... First Name.....

Address

.....Post Code.....

Date of Birth (dd/mm/yyyy)...../...../.....(W.T.C.)*AGE GROUP.....**

e-mail address.....Phone (H/W)...../.....

First Claim Club.....

AREA Club (eg. MMAC, VAC,..) and Membership #:...../.....

*******PLEASE COMPLETE THE FOLLOWING STATEMENT*******

When competing at this meeting,-The first claim CLUB I’m competing for is:-

.....My age group* (eg. W –d.o.b. 31/12/47 so for ALL 2012-**

age group is W65) is:-..... For RECORD purposes-‘CROSS’ the following

if appropriate: MEMBER OF ‘MMTG’?:()

*******THANK YOU*******

All entrants must read, agree to be bound by and sign the following:-“ I hereby agree that no person in any way involved with MMTG, will be liable for any accident, injury, loss or damage,- howsoever caused,-as a direct or in-direct consequence, of my participating in this meeting (THROWS FEST). I further declare that, if I am not fit to compete on the day, I shall not do so.”

SIGNED: _____ DATE: . . .