



Mail to:  
 Leighton Best  
 49 Diamond Avenue  
 Spreydon  
 Christchurch 8024

Scan and Email to:  
 info@powerlifting-cpa.com

## REGISTRATION FORM – 2012

**Full Name:** .....

**Address:** .....  
 .....

**Email:** .....

**Phone No:** .....

**DoB:** .....      **Sex:** Male / Female

Preferred method of contact: .....

**Class in which you are eligible to compete:**

Class (age)	Tick Box
*Junior U18	
*Junior U23	
Open	
*Masters 40-49	
*Masters 50+ 60+ 70+	

\* Proof of age required for new members. Please send copy of birth certificate or driver's licence

**CANTERBURY ASSOCIATION FEES: Due by 31 March**

Membership Type	Cost (\$)	Tick Box
Full Member	35.00	
Student	20.00	
Supporter	1.00	

**NB. All fees must be paid prior to competition**

**TOTAL AMOUNT ENCLOSED      \$**

Cheques Payable to Canterbury Powerlifting Association Or deposit into our WPT account:  
 03 1714 0048908 00 Please include your name as a reference

**All registrations to be sent to Above Address**