VNM 26-29 juni 2009
Huddinge (Stockholm)
Sweden

ANMÄLNINGSBLANKETT **ENTRY FORM** **MUODOSSA**

Efternamn/Surname/***Sukunimi***

Förnamn/First name/***Etunimi***

Land/Country/***Maa*** **DEN, FIN, ISL, NOR, SWE**

Födelseår/Year of birth/***Syntymävuosi*** 1 9 ☐ ☐ ☐ **Man**/Man/***Miehet*** ☐ **Kvinna**/Women/***Naiset***

Klubb/Club/***Seura***

X	**Markera med X i de grenar du önskar delta i** Please X-mark the events you will participate ***Merkitse X mihin lajeihin haluat osallistua*** **Gren/Event/Laji**	**Bästa resultat** **Best result** Parhaat tulokset **2008-2009**
	100 m	
	200 m	
	400 m	
	800 m	
	1500 m	
	5000 m	
	10000 m M35+	
	110 m Häck/Hurdles/***Aidat*** **M35-M45**	
	100 m Häck/Hurdles/***Aidat*** **M50-M65/K35**	
	80 m Häck/Hurdles/***Aidat*** **M70+/K40+**	
	400 m Häck/Hurdles/***Aidat*** **M35-M55/K35-K45**	
	300 m Häck/Hurdles/***Aidat*** **M60+/K50+**	
	3000 m Hinder/Steeplechase/***Esteet*** **M35-55**	
	2000 m Hinder/Steeplechase/***Esteet*** **M60+/K35+**	
	Höjd/High Jump/***Korkeus***	
	Stav/Pole Vault/***Seiväs***	
	Längd/Long Jump/***Pituus***	
	Tresteg/Triple Jump/***Kolmiloikka***	
	Kula/Shot put/***Kuula***	
	Diskus/***Discus***/***Kiekko***	
	Slägga/Hammer/ ***Moukari***	
	Spjut/Javelin/***Keihäs***	
	Vikt/Weight/***Paino***	
	5000 m Gång Arena/Track walk/***Kävely areena***	
	10 km Gång Landsväg/Road walk/***Kävely maantie***	
	Kastmångkamp/Throwing Pentathlon/***Heittomoni-ottelu***	

OTHERS

	Together Party **EUR 25** **(see separate info)** **Quantity**	
	T-shirt **EUR 12** **(see sep information)** **Size S to XXL**	

By signing this Entry Form I declare that to the best of my knowledge and belief that I am in good health and that there is no objection against my participation in VNM 2009 on medical reasons. I accept full responsibility in case of accident, injury or damage to myself or my property by me participation in the Nordic Veteran Champinchips in Huddinge 2009. I also give my consent to be subject to drug testing at VNM 2009, if I should be selected to do so.

Entry adress

This form has to be posted or faxed to the **national** veteran athletic association and together with the entry fees.
See separate letter of instructions

Date	**Signature**

Closing date for entries:
Friday 15th May 2009

Payment and address

First event: **EUR 30** Next Events **EUR 15**/each
Throw Pentathlon **EUR 35**
See then separate letter from each **national** veteran athletic association

For the national Federations only

Date	**Stamp or signature** **The national Federation**

CONTACT

Gata/Street/*Tie*

Post Nr/City Code **Ort/City**

Telephone **Mobile**

E-mail