



MALTA TRIATHLON FEDERATION

2017 Membership Form

NAME	
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D.O.B.			
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AGE AT 31.12.2017	
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AGE GROUP	U20		U23	
	O35		O40	
	O45		O50	
	O55		O60	

ADDRESS	
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MOBILE	
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EMAIL	
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AFFILIATED CLUB	B'KARA ST. JOSEPH		ST. PATRICK'S AC	
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PEMBROKE ATHLETA		MELLIEHA AC	
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AGONES SFC		MOSTA CYCLING C.	
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SIGNATURE BY CLUB REP.	
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NAME OF CLUB REP	
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STAMP OF CLUB	
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DATE	
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