



## Team Registration

Name of FRS :

Liaison Officer:

Tel:

Fax No:

Email:

Team Name:

Team Address:

Team Members:

- 1.
- 2.
- 3.
- 4.
- 5.

To be completed by the team manager and returned to:

NBAC Committee : [nationalbachallenge@gmail.com](mailto:nationalbachallenge@gmail.com)



## Team Registration

On behalf of the above team from:

I confirm that we have read and understand the rules governing the National BA Challenge and undertake to abide by the requirements laid out.

Signed:

Date:

Print:

I have enclosed a cheque

Payable to: NBAC

I have paid by BACS

Acc No: 53945863

Sort: 20 - 77 - 85

The full entry fee of £650.

\* Please note entry fee must be received by the 31st August before your team can be accepted as a participant in the National BA Challenge.



## Authorisation to compete

Authorisation to compete by Chief Fire Officer / Forecaster / Chief Executive:

I hereby confirm that this team from:  
is authorised to take part in the National BA Challenge.

Signed:

Position:

Date:

Fire & Rescue Service:

To be completed by the team manager and returned to:

NBAC Committee: [nationalbachallenge@gmail.com](mailto:nationalbachallenge@gmail.com)

## Insurance Indemnity

I hereby confirm that for the purposes of insurance the above team is  
deemed to be on official duties whilst attending the National BA Challenge.

Signed:

Position:

Date:

Fire & Rescue Service: