

**Registration form for the 11<sup>th</sup> German Potato Lifting Championship  
at Bauer Poppe on 11<sup>th</sup> September 2011**

**Bauer Poppe  
Am Lerchenkrug 3**

**D-27356 Waffensen, Germany**

or by fax to **(+49) (0)4268-1460**

First name, surname: \_\_\_\_\_

Address: \_\_\_\_\_

Postal code and town: \_\_\_\_\_

Country: \_\_\_\_\_

Age: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Age class as per invitation:             I     II     III     IV     IV

Team class (5 persons)   

Team name: \_\_\_\_\_

I herewith register for participation in the 11th German Potato Lifting Championship. I/we confirm that I/we have read the the invitation. I/we accept the conditions of the competition and the rule that the jury's decision is final. I/we agree that my/our names shall be published in the media and the internet in the event that I/we are among the winners. I/we shall be given a numbered starting place before the event starts and promise to be present in good time.

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature of a responsible adult for age classes I thru III

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To be completed by the organizer

Registration received: \_\_\_\_\_

Age class: \_\_\_\_\_ Start number: \_\_\_\_\_

Please send or fax the registration form for the 11th German Potato Lifting Championship  
to the one of the given addresses