



**THE NORTH FACE 100
ULTRA TRAIL CHALLENGE 2020**

TAIPING, MALAYSIA

TRANSFER CHIT FORM

First Name :	
Last/Family Name :	
Gender :	
ID / Passport No :	
Date of Birth (yyyy/mm/dd) :	
Nationality :	
Contact No :	
Email address :	
Emergency Contact Name & No :	
Any medical conditions ? :	
Bib # :	

Signature of new participant