AUSCYCLING

Cross Country – Lap Passing Template

Race: _____ Date: _____ Start Time: _____

Laps: _____ Number of Rider: _____

Lap of	**Lap of**	**Lap of**	**Lap of**	**Lap of**
Race Number	Race Number	Race Number	Race Number	Race Number

Commissaire's Name: _____

Commissaire's Signature: _____ Page no_____/_____