

70 Wild Miles Relay Team Entry Form – <u>25th June 2011</u> - Each member must complete & sign a form

780

Team Name					Team Leader			
Section:	Cycle 47m		Cano	be10m		I	Run13m	
Title			First	Name				
Surname								
Address								
	Postcode							
Email					_ №	lale	Female	
Daytime Cont	act Number] Eve	ning			
Date of Birth Previous Years of Entry								
Estimated time for cycle: 2hrs 2.15hrs 2.30hrs 2.45hrs 3 +hrs								
Do you suffer from any medical condition that the organisers or rescue services should be made aware of? Yes please provide details No								
Emergency c	ontact name:			Ν	lumber:			
I confirm that for the duration of the cycling section I will wear a head guard And will follow the Highway Code I confirm that I am familiar with and sufficiently practised in deep water canoe capsize drill I confirm that for the duration of the canoe section I will wear a buoyancy aid Please sign								
	-			Date				
All Participants are advised to take out their own personal accident / liability insurance.								
EQUIPMENT – First come first served, a limited number of canoes are available for use during this								
event. Please indicate if you would like to reserve a Share Centre Canoe I understand that each participant shall be expected to raise a minimum of £100. I enclose my entry fee of £25 which I/we understand is non-returnable if accepted for the event. Please make all cheques payable to "CLIC Sargent".								
(T-shirts will be PLEASE NOT	To Wild Miles sent out close to E: ALL ENTR 1 rd Floor, 31 Br	the event date FEES, T-SH	HIRT AND SPO			Large	X- Large E SENT TO	"CLIC
Sargent will not from my GP if I taken during 70 legal responsibi Signed	wish to enter 70 V accept liability for am in any doubt Wild Miles may b lity to ensure all sp would like to send you	any injury or lo as to my physic be used to public bonsorship mone	ss that may occur al ability to partici cise the events an ey / donations rece	as a result o pate in the ev d work of CL eived by me a	f my partic vent. I conf IC Sargent are paid to (ipation. I should s firm that I am awa t generally. I unde CLIC Sargent.	seek medical a re that photog rstand that I ha	dvice raphs ave a

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