

REGISTRATION FORM - GET INTO GEAR

One form per person please. All fields are mandatory, please complete in BLOCK CAPITALS. Please bring the completed form to the Get into GEAR training session.

Full name: Mr/Mrs/Miss		
Address:		Postcode:
Tel:	Mobile:	
Email:		
Date of Birth:		(Min. age 15 on day of race)
Male	<input type="checkbox"/>	
Female	<input type="checkbox"/>	
Are you currently involved in any other form of exercise?		Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what and how often?		
Running:	Complete Beginner? <input type="checkbox"/>	Returning to running? <input type="checkbox"/>
Are there any health issues/medical concerns we need to take into consideration? Please detail:		
I confirm I understand that participation in this course is entirely at my own risk and I should consult my doctor if suffering from any condition that might make running injurious to my health.		
Signature:		Date:
If you are under the age of 18 we require the signature of a parent/guardian.		
Print name:	Signed:	Date:

Note: Tick box if you DO NOT WANT to receive email updates and race details on this and future Run For All events. If not ticked, the above details will be stored on computer for future mailings.

I acknowledge that the event sponsors, race directors, or any person involved in the organisation of the event shall not be liable for any injury, accidents, loss or damage suffered by me in, or by reason of the event, however such may be caused. I am HEALTHY and have NO KNOWN medical conditions or any other reason why I should not participate in the event.

By completing this application form you consent to the collection, storage, processing and use of your personal information in accordance with the Data Protection Act 1998 or any amendment or replacement of the same.

All Profits from Run For All Ltd go directly to the Jane Tomlinson Appeal.

