

Registration Form - Great North Run

Newcastle on Sunday, 13 September 2015



Registration fee £50 (non-refundable), minimum sponsorship £200

PLEASE NOTE: All participants have to be 16 years of age or over on the day of the event

PERSONAL INFORMATION (Please use BLOCK CAPITALS)

Title	First name	Surname
Address		
Town/City	Postcode	
Home tel	Work tel	
Mobile		
Email		
Date of Birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> Female <input type="checkbox"/> Male

HOW DID YOU HEAR ABOUT OUR PLACES FOR THIS EVENT? (Please tick box)

Word of mouth/family /friend Previous participant Newspaper/magazine
 Kidneys for Life Staff (Name _____)
 Poster/Flyer (Location _____) Other website (Name _____)

Please tell us briefly why you have decided to support Kidneys for Life?

PAYMENT INFORMATION

We accept payment of the registration fee by all major credit & debit cards. If paying by cheque, please make payable to "Kidneys for Life".

Name on card:

Please debit my Visa Access Mastercard Switch Maestro Electron Visa Debit with the sum of £ _____
Card no. Valid from Expiry date
Issue no. (Switch cards) Security no. (the 3 digit number found on the reverse of the card)
Signed _____ Date _____

T-Shirt

Please let us know which t-shirt you require: (please tick box)

Size S M L XL XXL No t-shirt required

KIDNEYS FOR LIFE DISCLAIMER Please read and sign as indicated

Terms and conditions: I agree to take part in this event entirely at my own risk. I agree that Kidneys for Life, its sponsors, the event organisers, contractors and agents shall not be liable in any way for any injury, loss, damage or death that might occur as a result of my participation in the event. I am not aware of any medical condition or other reason why I should not participate in the event.

KIDNEYS FOR LIFE STRONGLY RECOMMENDS ALL PARTICIPANTS TAKE PERSONAL ACCIDENT AND MEDICAL INSURANCE FOR THIS EVENT

Age Restrictions: you must be over the age of 16 to take part in this event.

In order to participate in the event, I will endeavour to raise the pledged amount of sponsorship shown above. Kidneys for Life reserve the right to cancel the event or alter the date or time of the event for any reason. If the event is cancelled a full refund will be given (excluding registration fee).

By signing this form I confirm that I have read and understood the terms and conditions set out above and consent to Kidneys for Life holding my personal details on a confidential basis for the express purpose of participating in the event. By taking part, all participants confirm they are happy for any stories or photographs taken during this event to be used by Kidneys for Life to publicise events and Kidneys for Life generally.

We would like to send you details by post or email of other events that you might be interested in. Tick the box below before return the form to us if you would prefer us not to keep your details for this purpose. Your details will not be passed on to a third party.

Signed _____

Date _____

PLEASE NOTE: Entries will not be processed unless the disclaimer is signed. If participants are under the age of 18, disclaimers must be signed by a parent or guardian.

Please return completed entry forms along with your registration fee to:

Irene Chambers, Kidneys for Life, Renal Unit, MRI, Oxford Road, Manchester, M13 9WL

Telephone: 0161 276 6671 email: fundraiser@kidneysforlife.org

Registered Charity No: 505256

