

Registration Form - Giro Guinness Cycle

6-11 July 2015



Registration fee **£99** (non-refundable), minimum sponsorship **£1,500**

PLEASE NOTE: All participants have to be 18 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?

Please enclose your non-refundable payment of £99 for registration fee

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 **£99.00**

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 _____

Jersey Size Please let us know which cycle jersey size you require: (please tick box)

Size S M L XL XXL No jersey 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

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 for the event available overleaf 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.

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



For more information visit
www.kidneysforlife.org
Email: carol.bonham@kidneysforlife.org
Tel: 07714 864833

