## FOR ENTRIES BEFORE 31/12/12 YORK 10K ENTRY FORM | Race Date: Sunday 4th August 2013

THIS FORM CAN BE PHOTOCOPIED AND USED TO APPLY, OR YOU CAN ENTER ONLINE AT www.runforall.com One form per person please. All fields mandatory, please complete in BLOCK CAPITALS.

Full name: Mr/Mrs/Miss			FOR OFFICIAL USE ONLY:		
Address:	dress: Postcode:				
Tel:	$\wedge$	obile:			
Email:					
UK athletics club:	Ą	ge on 04/08/13:	(Min. age 15 on day of race)		
Date of birth:	Male	Female	Wheelchair Entrant		
Emergency Contact Nar	ne:	Emergency Contac	t Number:		
If you are under 18 we require Print name:	the signature of a parent/guardian.	Signed:			
Athletes with physical spec	ial needs/disabilities other than v	vheelchair competitors plea	se contact info@runforall.com to con	nplete the registration.	
Do you wish to make a d	onation to the Jane Tomlinson Ap	ppeal? Yes No			
£22 (General R	ace Entry fee)	Donation amount	£ . Total amount p	paid £ .	
UKA Membership Numbe	er:				
Please make cheques pay	able to: Run For All Ltd - York 10	K			
, , , , , , , , , , , , , , , , , , , ,	er Gift Aid allows the Jane Tor v'll add an extra 25p from your to	1 1	ax back from HMRC on all your nny just simply tick the box.	donations.	
Predicted time to complete	event: Hr				
Finishers +shirt. Upon finishing the	e event every runner will receive a good S	/ bag including a finishers tshirt. I	Please tick the relevant box to let us know wh	hat size you will require:	
Yorkshire Cancer Research of Brain Tumour Research of	rch Macmillan Car and Support sing pack you authorise us to release y	ndlelighters Martin H	ne events partner charities: Jane T louse St Leonards Hospice C our full name and address to the pack pro		
Where did you hear about the previous participant Internet search	out the event?  Word of mouth/family/friend  Other (Please specify):	] Newspaper/magaz	zine 🗌 Radio 🗌 Run For A	All website [	
Upon signing this registre	ation form I have read, accept o	and agree to all condition	s of entry available at www.runfa	orall.com	
Print name:	Signed		Date:		
Note: Tick box if you DO NC computer for future mailings.	DT WANT to receive email updates c	and race details on this and fut	ure Run For All events.□ The above deta	ails will be stored on	
damage suffered by me in, or reason why I should not partic	by reason of the event, however suc	ch may be caused. I am HEAL que confirms your entry into the	of the event shall not be lia <b>ble for any ir</b> THY and have NO KNOWN medical as arce. In the event of cancellation for rethe following box.	conditions or any other	
By completing this application		storage, processing and use c	of your personal information in accordan	nce with the Data	

ALL PROFITS FROM THIS EVENT GO TO CHARITY

Please return your completed entry form along with your registraton fee to:

Run For All Limited, PO Box 314, Rothwell, Leeds LS26 1BY

For further information email: info@runforall.com