

St. Luke's Hospice



Reg. Charity No. 289466

Your Hospice - Caring for you when and where you need it most

Midnight Walk Challenge ENTRY FORM

Your info

Title:.....
Surname:.....First Name(s):.....
Address:.....
.....Postcode:.....
Email:.....
Contact Number:.....
M / F
Date of Birth:..... / /

Additional Info

Where did you hear about this event:.....
Would you like to receive our Newsletter E-Bulletin?: Yes ☐ No ☐
Emergency Contact Details
Full name:.....
Contact Number:.....

Entry Fee

£10.00 Per Person

Total enclosed: £..... - Cheques / Postal orders made payable to 'St Lukes Hospice'

I declare that I am fit to enter; I understand that I enter at my own risk and that the organizers will in no way be held liable for: personal injury, loss or damage as a consequence of my participation.

Signed:.....Date:.....

*UK Athletics (UKA) guidelines strongly advise that people of 16 years and under do not competitively race 10 mile distances. Therefore 16 yrs and under are not permitted to participate.

Send completed forms to:
Kerry Chambers, Midnight Walk Challenge, St Lukes Hospice, Fobbing Farm, Nethermayne, Essex, SS16 5NJ

www.stlukeshospice.com