



Park to Park Challenge - Saturday 16<sup>th</sup> May 2020  
Registration Form

Personal Details

Title	First Name	Surname

Date of birth if under 16	
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Address

House name or number		Road / Street	
Town / Village		City	
County		Post Code	

Email	
Phone	
Mobile	

I have agreed to take part in the Park to Park Challenge 2020.

I understand that this is a sponsored event and that I will be responsible for doing my best to collect all sponsorship monies pledged and delivering them to the Queen Elizabeth Parks Project.

Cheques should be made payable to: [Queen Elizabeth Parks Project](#)

I will adhere to all health and safety instructions issued by the Challenge organisers and I will ensure that I do my best to keep myself safe whilst taking part in the challenge.

(If you have any concerns about your ability or fitness to take part in the Challenge you should consult your GP)

Signed		Date	
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For Under 16s

I am the parent or guardian of

and I give my permission for them to take part in the Park to Park Challenge.

Signed		Date	
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Please provide a contact person and mobile to be used in an emergency

Name		Mobile Number	
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Your personal details will only be used for contacting you in conjunction with this event.

**These details will be deleted after the Park to Park Challenge has taken place unless you tick this box**   
to indicate that you give us permission to keep your details and use them to send you updates about the work of the Project.

Your details will not be shared with any other company, individual or organisation.