



## 3<sup>rd</sup> Llangollen Round Challenge 2<sup>nd</sup> – 3<sup>rd</sup> June 2018

### Entry Form (One for each entrant)

Please return **with cheque** to: **Sandra Woodhall, Bache Isa, Willow Street, Llangollen LL20 8HH**. You will receive confirmation of entry, accommodation details, route booklet with amendments, full details, rules, and sponsor forms. Please note that entry will close when the event is full. If you would like more information at anytime please phone on mobile 07905 330788 or e-mail [thellangollenround@gmail.com](mailto:thellangollenround@gmail.com). The event organiser will only use your details to communicate with you about the Llangollen Round Challenge.

Name as to appear on certificate ..... Age on day of walk. **Must be 15 years or over**.....

Male ..... Female ..... (please tick) Car registration no. (if left during walk) .....

Address:.....

..... Post Code..... E-mail:.....

Tel no. (landline) ..... (Mobile if carried on event day) .....

Name and telephone contact no. in case of emergency.....

Any medical condition/information that may be relevant in case of accident (will be in strict confidence). If you are unsure of your physical ability to take part in the event please take medical advice from a General Practitioner prior to the event.

.....Where did you see this walk advertised.....

### Entry Fee £25 for either 1 or 2 day event

**I would like to enter** ( please tick one space ): the 1-day event ..... 2-day event.....

Family entry (1 booklet) for the 2-day event £60. A separate form should be filled in for each member

If sending a cheque make payable to **The Llangollen Round Association**. Unfortunately it is not possible to refund Entry Fees.

**I understand that I take part in the Llangollen Round Challenge at my own risk and that neither the Llangollen Committee nor Cancer Research UK will be liable for any injury, damage or loss that may occur as a result of my participation other than in respect of death or personal injury arising as a result of their negligence. I agree to abide by the CRUK event rules and observe the Countryside Code at all times. I confirm that I have sufficient knowledge, experience, equipment and navigational skills to participate in a long-distance walk in all conditions. I understand that medical advice should be sought from a General Practitioner if I am in doubt as to my physical ability to participate in the event. I consent that photographs taken during the Llangollen Round Challenge event may be used to publicise events and Cancer Research UK in all media**

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

### Counter Signature required by Parent or legal Guardian (If entrant is under the age of 18)

**I agree to the participation of the above named person in the Llangollen Round Challenge. He / she will be accompanied by me at all times.**

Signed..... Name..... Date.....