

SHINE RELIEF TRUST WALK REGISTRATION (FAMILY)

Please send completed form to: Suite 228 Queens House, Paragon Street, Hull HU1 3NQ or email to info@shine-relief.org

Party leader

Full name.....

Address.....

.....

.....

Post Code DOB

Contact number

Email

Emergency contact details

Phone

Name

No. Children in my party please complete details below

Please complete

ADULT @ £4.....

CHILD over 12 @ £2.....

CHILD UNDER 12 free.....

Total £

Donation* £

Total Amount £

Non-refundable/transferable

All funds will be used to support Shine vital work in Malawi.

*If you wish to make a donation please ask about a gift aid form.

Please circle payment method

Cash/cheque

BACS transfer*/ Eventbrite*

*Date of payment

Full name

Address if different from above

.....Post Code DOB

Emergency contact if different from above.....

Full name

Address if different from above

.....Post Code DOB

Emergency contact if different from above.....

Full name

Address if different from above

.....Post Code DOB

Emergency contact if different from above.....

I agree to take responsibility for all participants named above under the age of 18. I consent to photographs, video, quotes and any other record of our participation in the event being used for marketing and publicity purposes, both online and in print. If I do not want our photos or quotes to be used for any purpose, I will email info@shine-relief.org. I understand that Shine Relief Trust will retain and use the data I have provided within the terms of the Data Protection Act for the purpose of administrating this event. My details will not be passed to third parties except in a medical emergency. Shine Relief Trust would like to keep you informed of its fundraising and other activities.

Please tick to opt-in for email /postal communications. Thank you for participating in our event which will impact many lives in Malawi.

***I declare my party is HEALTHY and have NO KNOWN medical conditions or any other reasons why we should not participate in this event. I have read, accept and agree to all conditions above and the Walk T&C's found at <http://www.shine-relief.org>**

*Signature..... **if submitted electronically will need signature on the day*

Print Name Date