



REGISTRATION FORM

Leigh/Southend Seafront Walk - Sunday 20th May 2018

Every person who plans to participate in the walk must complete this form and return it to the address below. Once the registration form has been received an official Sponsorship Form will be sent to you.

Name	-----	Please return this form to:- Sandy Lambert Flat 31 Alston Court 15 Crowstone Road Westcliff-on-Sea SS0 8EH
Address	-----	

Telephone	-----	
Email	-----	Group -----

Please tick:

T-Shirt: 5-6yr, 9-11yr, Small, Medium, Large, XL, XXL I have a BLUE T-shirt

My personal target challenge is:

10 miles Leigh/ Toby Carvery, T.B./ Leigh

8 miles Leigh/ The Kursaal / Leigh

7.2 miles Leigh/ The Pier/ Leigh

5.5 miles Leigh/ Palmeira Arches/ Leigh

3.2 miles Leigh/ Joscelyn's Beach/ Leigh

1.5 miles Leigh/ Bell Wharf/ Leigh

Booking terms and conditions

1. A Walk to D'Feet or MND T-shirt will be given to each registered walker to be worn on the day of the walk to help raise awareness.
2. Each participant agrees to obtain sponsorship on behalf of the South Essex Branch of the Motor Neurone Disease Association. All money will be paid by **31st July 2018**. All completed, and incomplete sponsorship forms must be returned with the sponsorship money.
3. All registered participants will be covered by the Association's Public Liability Insurance against third party damage. However please note that this does not cover you or your dependants for personal injury or death. We therefore strongly recommend that you take out your own insurance cover for personal accident benefits to whatever level you feel appropriate. If in doubt you should seek independent advice.

Although Walk to D'Feet MND is a low risk event, as with all sports activities it does involve personal risks. I therefore accept and confirm that to the best of my knowledge, my general state of health and fitness is good and that I take full responsibility for my fitness to take part. I voluntarily accept that there may be risks, and that I do not hold the Motor Neurone Disease Association and its subsidiaries responsible for any accident or incident resulting in any loss or damage (including bodily injury and death).

I confirm I have read all the above clauses and the Health & Safety Guidelines on my Information Sheet. I understand and agree to be bound by those terms and conditions and to comply fully with the same and deem that I am fit to take part in this event.

I agree that my details can be retained to advise me of future walks. This information will not be passed to anyone else. However should you wish to receive information from National Office about the work of the MND Association please tick: mail or e-mail

Name -----
Reg. Charity No. 294354

Signed ----- Date -----

Water stops sponsored by Adventure Island and Essex Water.