## MIDLAND 30:30 – 25<sup>th</sup> FEBRUARY 2017 REGISTRATION FORM

Thank you for entering Midland 30:30. Please complete this form (including the parental/guardian consent section if applicable) and return it with a cheque for £50 per team member (payable to Soldier 30:30) to Soldier 30:30, 1 St Cherries, Spreyton, Crediton, Devon, EX17 5EB.

On receipt you will be sent formal joining instructions for the event. Should you have any queries please contact us via info@soldier3030.org.uk.

Please note that a condition of starting the event is for each team to have raised at least £1,000. In the days preceding the event, the organisers will contact each team captain and request evidence of these funds having been raised.

This may be via a webpage on justgiving.com or cash sent directly to SSAFA The Armed Forces Charity, marked for the attention of Lucy Searles, SSAFA The Armed Forces Charity, 4 St Dunstan's Hill, London, EC3R 8AD.

Team name:				
Event class: (Delete as appropriate)	Open class (for teams not in Insider or Wounded Classes)			
	Insider class (for teams with local knowledge)			
	Wounded class (for teams with a wounded member)			
Distance:	30 miles			
(Delete as appropriate)	30 kilometres			
Gender: (Delete as appropriate)	Male team			
	Female team			
	Mixed team			
	Junior (average age < 20 yrs)			
Age: (Delete as appropriate)	Peak (average age 20 yrs – 40 yrs)			
	Senior (average age > 40 years			
No. team members at free evening meal:		No. team non-members at evening meal @ £20 each:		





Team captain's name:		
Team captain's address:		
Team captain's email:		
Team captain's mobile:		
Team captain's age:	T-shirt size:	
Team captain's next of kin:	NOK mobile:	
# 2 name:		
# 2 address:		
# 2 email:		
# 2 mobile:		
# 2 age:	T-shirt size:	
# 2 next of kin:	NOK mobile:	
#3 name:		
# 3 address:		
# 3 email:		
# 3 mobile:		
# 3 age:	T-shirt size:	
# 3 next of kin:	NOK mobile:	
#4 name:		
# 4 address:		
# 4 email:		
# 4 mobile:		
# 4 age:	T-shirt size:	
# 4 next of kin:	NOK mobile:	





# 5 name:		
# 5 address:		
# 5 email:		
# 5 mobile:		
# 5 age:	T-shirt size:	
# 5 next of kin:	NOK mobile:	
#6 name:		
# 6 address:		
# 6 email:		
# 6 mobile:		
# 6 age:	T-shirt size:	
# 6 next of kin:	NOK mobile:	
#7 name:		
#7 address:		
#7 email:		
# 7 mobile:		
# 7 age:	T-shirt size:	
#7 next of kin:	NOK mobile:	
# 8 name:		
# 8 address:		
# 8 email:		
# 8 mobile:		
# 8 age:	T-shirt size:	
# 8 next of kin:	NOK mobile:	





## **CONSENT FORM (FOR ALL PARTICIPANTS UP TO AGE 18)**

TO BE COMPLETED BY THE YOUNG	PERSON'S PARENT / GUARDIAN
Full Name of Young Person:	Date of Birth:
Home Address:	
Telephone Number (Landline & Mobile):	
I advise you that the above child has the following r	nedical condition(s) e.g. Asthma:
	Please provide us with more information
In an emergency, please contact the person below	if you cannot get hold of me:
Name:	Telephone:
PARENTAL CONSENT (PLEASE REA	AD CAREFULLY & SIGN BELOW):
I am the legal parent / guardian of this young perso I consent to the above young person participating in I agree that Soldier 30:30 Limited may exercise mevent as Soldier 30:30 Limited may consider reaso I authorise Soldier 30:30 Limited to seek medical adeems necessary in case of emergency or concern I consent to details of my child, being kept confident	n the Midland 30:30 event. y parental responsibility for the duration of the nably necessary. attention for my child as Soldier 30:30 Limited
Signature of Parent / Guardian:	Date:
Please Print Your Name:	



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