

MIDLAND 30:30 – 11th MARCH 2023 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 Midland 30:30, 1 St. Cherries, Spreyton, Crediton, Devon, EX17 5EB or to info@soldier3030.org.uk if sending a scanned PDF.

Should you wish to make a bank transfer for the team registration fee, our details are as follows: bank – Barclays, a/c name – Soldier 30:30, a/c – 13670074 s/c – 208526.

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 on behalf of our beneficiary charity DMRC Benevolent Fund which prefers that participants set up a team fundraising page via <u>justgiving.com</u>. In the days preceding the event, the organisers will contact each team captain to confirm the establishment of a team fundraising page on <u>justgiving.com</u>.

Team name:			
	Open class (for	teams not in Insider or Wounded Classes)	
Event class: (Delete as appropriate)	Insider class (for teams with local knowledge)		
(2 3 3 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Wounded class (for teams with a wounded member)		
Course:	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)		
(Doloto de appropriato)	Senior (average	erage age > 40 years	
No. team members at free evening meal:		No. non-team members at evening meal @ £20 each:	





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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:	





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CONSENT FORM (FOR ALL PARTICIPANTS UP TO AGE 18)

Full Name of Young Person:	Date of Birth:
Home Address:	
Telephone Number (Landline & Mobil	e):
I advise you that the above child has	the following medical 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:
371	
Name:	Telephone: Telephone: T (PLEASE READ CAREFULLY & SIGN
Name:	
Name:	T (PLEASE READ CAREFULLY & SIGN
Name:	T (PLEASE READ CAREFULLY & SIGN BELOW):
PARENTAL CONSENT 1. I am the legal parent / guardiant 2. I consent to the above young parent / guardiant	T (PLEASE READ CAREFULLY & SIGN BELOW): n of this young person. person participating in the Midland 30:30 event.
PARENTAL CONSENT 1. I am the legal parent / guardiant 2. I consent to the above young paragraph of the second paragraph of th	T (PLEASE READ CAREFULLY & SIGN BELOW): n of this young person. person participating in the Midland 30:30 event. we exercise my parental responsibility for the duration of the second
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