

## Age UK Northumberland Fundraising Challenge Registration Form

Event:	Causeway Charity Challenge		
Date:	Wednesday 20 <sup>th</sup> May – Sunday 24 <sup>th</sup>	¹ May 2020	
Please complete & return the following forms to confirm your place on the above challenge			
By signing	ng this registration form you declare that	t:	
ackr part	I am familiar with the nature of the activity which I wish to undertake and acknowledge all of the risks involved. I understand and accept that I take part entirely at my own risk and that the organisers accept no liability for death or injury unless caused by their negligence		
any take	I hereby declare that I am in good health, and that I am not suffering from any medical condition or disability that might make it unsafe for me to take part in the event. I am ultimately responsible for deciding whether to participate		
I giv	edge to raise a minimum of £1,100 for Age ve my permission for photographs which a ent to be used to publicise future events.		
Sign	ned :	Dated :	

## PLEASE WRITE CLEARLY IN BLOCK CAPITALS

Forename:	
Surname:	
Date of birth:	
Telephone No:	
Mobile No:	
Email:	
EMERGENCY (	CONTACT
Relationship:	
Address:	Doctordo
	Postcode
Telephone No:	
Mobile No:	