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**CRANSLEY HOSPICE ROAD RACES SUNDAY 17 SEPTEMBER 2017
OFFICIAL ENTRY FORM**

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| SURNAME: |
| FORENAME: |
| MALE / FEMALE: | AGE ON18/09/16 |  |
| ADDRESS: |
|  |
| POSTCODE: | TEL. NO: |  |
| EMAILREQUIRED: |
| CLUB/SCHOOLAFFLD TEAM: | NON AFFLD TEAM NAME: |  |

All runners please tick which race you wish to enter. Age requirements –
over 15 yrs for 10k, over 17 yrs for ½ M

 10K Half Marathon

 **ENTRY FEES: 10k** £17 affiliated/£19 non aff’d

 Ha**lf Marathon** £18 affiliated/£20 non aff’d

Plus £2 on the day prior to 10.00 a.m, subject to availability

 OFFICIAL USE ONLY

NO

RM

PD

DF

**EARLYBIRD! BOOK BY 31st May and save £2!**

**Declaration: Please read before signing.** I declare that I am an amateur as defined by UK Athletics rules.
I am medically fit to take part in this event & I enter the race on the understanding that I do so at my own risk. I will not hold the organisers or their sponsors responsible for any accident, damage or loss, however caused either before, during, after or as a result of entering the race. I agree to abide by the rules of the event, which includes no wearing of head phones [as introduced in UKA rules April 2016] and to obey instructions given by race officials and marshalls. In the event of a dispute, the Race Director’s decision will be final. I also accept that images may be taken during the event and will be used for publicity purposes. Please note any sponsor money raised by entering this event should be donated to Cransley Hospice only. A signed entry form will be considered acceptance of the above declaration and terms. I hereby consent to my picture to be used for marketing purposes.

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| Signed: Date: |