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ENTRY FORM

GUERNSEY WORLD AID WALK

BANK HOLIDAY MONDAY 3rd MAY 2010

in support of

CHRISTIAN AID, OXFAM, SAVE THE CHILDREN,
ACTIONAID and THE TUMAINI FUND

www.worldaidwalk.org.gg



Start/Finish: MARKET SQUARE, St Peter Port - 9.00 am – 20 kms

Children below Year 6 must be accompanied by a named adult (18+)

Enquiries: Christine Woodall (Administration assistant) tel 235161

Block Capitals please

NAME(S) OF WALKER(S) at same address:

..... DATE(S) OF BIRTH:

ADDRESS (*Block Capitals*):

.....POSTCODE:

tel/mobile/emergency nos:

SCHOOL(S)*:

Where appropriate, your sponsorship pack will be returned via your school – please allow 2 weeks

Name of accompanying adult (18+) for children below Year 6:

TEAM NAME (if any)*: BUSINESS/ORGANISATION (if any)*:

***Useful for awards identification eg schools merit trophy, best team trophy, corporate award etc**

IT IS ESSENTIAL THAT YOU NOW SIGN BELOW

Unsigned forms will be returned to you for a signature

DECLARATION OF WALKER *or*

in the case of walkers under 16 years of age DECLARATION OF PARENT/GUARDIAN:

I am willing / I am willing for my child (*delete as applicable*) to take part in the World Aid Walk and will undertake that I will be responsible for collection and prompt payment of sponsorship. I understand that care will be taken by the organisers to try to ensure the safety of the walkers, but I hereby indemnify the organisers from and against any liability arising from my / my child's participation in the Walk.

NAME(S) (*Block Capitals*).....tel/mob nos (if different):

SIGNATURE(S): DATE:

The Guernsey World
Aid Walk is sponsored
by Ipes



Public liability insurance for this Walk is kindly sponsored by Insurance Corporation of the Channel Islands Ltd

Please
affix
stamp

Guernsey World Aid Walk 2010
c/o A Vontade
Les Quatre Vents
St Martin's
Guernsey
GY4 6SS