

SETTLE LOOP TOUGH TRAIL RACE ENTRY FORM

Race number _____

Full name _____

Address _____

Phone number _____ Mobile _____

Email _____

Vehicle reg _____ Club _____

Date of birth _____ Category (please circle) M/F/MV40/LV40/
MV50/LV50/MV60/LV60/MV70/LV70/Local

Emergency contact _____ Phone _____

I UNDERSTAND THAT THIS RACE IS HELD IN ACCORDANCE WITH BOTH THE RULES AND SAFETY REQUIREMENTS OF THE FRA. I CONFIRM THAT I AM AWARE OF THE ORGANISER'S INFORMATION AND REQUIREMENTS IN CONNECTION WITH THIS RACE. I ACCEPT THE HAZARDS INVOLVED IN FELL RUNNING AND ACKNOWLEDGE THAT I AM ENTERING AND RUNNING THIS RACE AT MY OWN RISK. OTHER THAN THE ORGANISER'S LIABILITY FOR CAUSING DEATH OR PERSONAL INJURY BY NEGLIGENCE, I CONFIRM THAT I UNDERSTAND THAT THE ORGANISER ACCEPTS NO LIABILITY TO ME FOR ANY LOSS OR DAMAGE OF ANY NATURE TO MYSELF OR MY PROPERTY ARISING OUT OF MY PARTICIPATION IN THIS RACE.

Signed _____ Date _____

Please send with cheque payable to "1st Castleberg (Settle) Scout Group" to T Wilson, Croft Cottage, Commercial Street, Settle, North Yorkshire, BD24 9HP by September 10th 2011. No confirmation of entry will be sent—please consider the cashing of your cheque as your receipt. Please collect number at Registraon on the day.
