



Registration Form

Just Walk 12th May 2012

PARKINSON'S^{UK}
CHANGE ATTITUDES.
FIND A CURE.
JOIN US.

Please fully complete all details below:

*Mrs/Miss/Mr	*First Name	* Last Name	
*Date of birth		*Mobile number during the walk.	
*Email address			
T-shirt size			
Chosen Charity* & Fundraising Target			

***We will be forwarding your details onto your chosen charity, unless otherwise stated by you.**

Address	
How did you hear about Just Walk?	

All medical information will be treated as confidential

*Do you have any medical conditions or do you take any medication? Please give details.	
*Do you have any special dietary requirements, if so please give details?	

- I am taking part in the 10km route and I am under the age of 12 yrs old - I enclose a payment by cheque for £5.00
- I am taking part in the 10km route - I enclose a payment by cheque for £25.00
- I am taking part in the 20km route and I am under the age of 12 yrs old - I enclose a payment by cheque for £25.00
- I am taking part in the 20km route - I enclose a payment by cheque for £50.00
- I am taking part in the 40km route - I enclose a payment by cheque for £60.00
- I am taking part in the 60km route - I enclose a payment by cheque for £70.00

Name

Signed

Please make cheques payable to: Across The Divide.

Return forms to the following address: Across the Divide Ltd, Thorncombe Barn, Fore Street, Thorncombe, Nr Chard, Somerset, TA0 4PP