



REGISTRATION FORM

THE WHITEBROOK WIND-UP 10K (MIN AGE 16)

08:30 REGISTRATION – START AT 10:00

THE VILLAGE HALL, WHITEBROOK, MONMOUTH, NP254TT

NAME: _____ AGE (ON RACE DAY): _____ SEX: _____

EMAIL: _____ NEXT OF KIN: _____

EMERGENCY CONTACT NO: _____

Declaration: I agree that I will run the race exclusively on foot and do so at my own risk accepting any hazards that I may encounter on the course. I take full responsibility for my personal safety and hereby declare that, to the best of my knowledge, I am medically fit to race.

Signed: _____ Date: _____

Please add here any medical condition or other information you wish to make known to the First Aid crew / medics. Continue overleaf as necessary.

Please fill-in this registration form and bring it to the event organizers on the day. If you can't print it just come along early so that you have time to complete one on the day.

FOR MORE INFORMATION CONTACT: clive.weatherby@gmail.com