

# CLUB RELAYS CHAMPIONSHIPS NATIONAL WATER SPORTS CENTRE, ADBOLTON LANE, HOLME PIERRE PONT, NOTTINGHAM, NG12 2LU SATURDAY 25<sup>TH</sup> & SUNDAY 26<sup>TH</sup> AUGUST 2012 500M SWIM - 15KM CYCLE - 5KM RUN TEAM RELAY

### TO BE COMPLETED BY THE TEAM CAPTAIN NEATLY IN BOLD CAPITALS

### PERSONAL DETAILS

| NAME:  |                     |                    | SURNAME:                              |  |   |  |  |  |
|--|---------------------|--------------------|---------------------------------------|--|---|--|--|--|
| DATE OF BIRTH:   |                     |                    | (All entrants mus approval is require | t be a minimum of 15 on<br>ed - the signature & T&C sh | the day of the race, i<br>could be signed off by an | f under 18yrs parental<br>appropriate adult) |  |  |
| GENDER:  | MALE                | FEMALE             |                                       |  |   |  |  |  |
| ADDRESS:   |                     |                    |                                       |  |   |  |  |  |
| POSTCODE:  |                     |                    |                                       |  |   |  |  |  |
| EMAIL:   |                     |                    |                                       | TELEPHONE:   |   |  |  |  |
| HOW MANY DAYS PER WEEK DO YOU UNDERTAKE A TOTAL OF AT LEAST 30 MINUTES OF MODERATE INTENSITY PHYSICAL ACTIVITY (an activity that leaves feeling warm and slightly out of breath) 0 |                     |                    |                                       |  |   |  |  |  |
| EVENT DETAILS  |                     |                    |                                       |  |   |  |  |  |
| ARE YOU A MEMBE  | R OF THE BRITISH TF | RIATHLON? YES / NO | ).                                    | IF YES BRITISH TRIATHLON                               | NO.:  |  |  |  |
| ORGANISATION/CL  | UB:                 |                    |                                       |  |   |  |  |  |
| DO YOU HAVE ANY MEDICAL CONDITIONS OR DISABILITIES:  |                     |                    |                                       |  |   |  |  |  |
| EMERGENCY NAME   | & CONTACT NUMBER    | R:                 |                                       |  |   |  |  |  |
| HOW DID YOU HEA  | R ABOUT THIS EVEN   | Г:                 |                                       |  |   |  |  |  |
| PLEASE TELL US SOMETHING INTERESTING ABOUT YOUR TEAM (MAX 100 CHARACTERS):   |                     |                    |                                       |  |   |  |  |  |





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#### **TEAM INFORMATION**

When entering your teams make sure that you put the teams into the correct AM or PM categories.

SATURDAY AM - MIXED SATURDAY PM - FEMALE SUNDAY AM - MALE

PLEASE NOTE - IF YOU DO NOT SELECT YOUR TEAMS INTO THE CORRECT CATEGORIES, WE CANNOT GUARENTEE THAT WE WILL BE ABLE TO PUT YOU INTO THE CORRECT CATEGORY.

I - THE TEAM CAPTAIN WISH TO ENTER THE FOLLOWING AMOUNT OF TEAMS (Please write the number of teams you wish to enter in each category)

| DAY | EVENT<br>(AM / PM) | CATEGORY | TEAM NAME |
|-----|--------------------|----------|-----------|
|     | (AM / PM)          |          |           |
|     |                    |          |           |
|     |                    |          |           |
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TEAM RELAY
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| 10 DE COMI LETED DI TITE TEMIN CAN TANNATE IN DOED CANTALE   |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| NTRY FEES - PLEASE TICK  |  |  |  |  |  |  |
| ☐ ENTRY £160.00  |  |  |  |  |  |  |
| DEFICIAL EVENT CHARITY   |  |  |  |  |  |  |
| PLEASE TICK THIS BOX IF YOU WOULD YOU BE INTERESTED IN RECEIVING A FUNDRAISING PACK FROM OUR OFFICIAL CHARITY CANCER RESEARCH UK   |  |  |  |  |  |  |
| CANCER RESEARCH UK WOULD LIKE TO KEEP IN CONTACT WITH YOU ABOUT UPCOMING NEWS, EVENTS AND FUNDRAISING ACTIVITIES USING THE CONTACT DETAILS YOU HAVE SUPPLIED ABOVE. PLEASE TICK HERE IF YOU WISH TO RECEIVE THIS INFORMATION   |  |  |  |  |  |  |
| ARE YOU WILLING TO MAKE A DIRECT DONATION TO CANCER RESEARCH UK (PLEASE ADD TO ENTRY FEE):   |  |  |  |  |  |  |
| $\square$ = £5.00 $\square$ = £10.00 $\square$ = £20.00 = Other Amount   |  |  |  |  |  |  |
| I am a UK taxpayer, please treat all qualifying gifts of money that I have made today and in the past and all future gifts of money that I make to Cancer Research UK as Gift Aid donations.   |  |  |  |  |  |  |
| Your donation will support their life-saving work on finding new ways to prevent, diagnose and treat cancer. Cancer Research UK's work is entirely funded by the public, so every donation counts.   |  |  |  |  |  |  |
| If you are a UK taxpayer, the value of your donation can increase by at least 25% under the Gift Aid scheme - at no additional cost to you! Please tick the box above to join the Gift Aid scheme and we will pass your details to Cancer Research UK to enable them to claim Gift Aid on your donations.  |  |  |  |  |  |  |
| Gift Aid details are available at <a href="https://www.onestepbeyond.org.uk/gift-aid.php">www.onestepbeyond.org.uk/gift-aid.php</a>  |  |  |  |  |  |  |
| TERMS & CONDITIONS / SIGNATURE   |  |  |  |  |  |  |
| f members of your team are not British Triathlon Federation (BTF) members, they are required to purchase a day membership to take part in BTF egistered events. A BTF Day Membership provides non BTF members with civil liability and personal accident insurance cover during the event and confirms their agreement to abide by the conditions of membership and rules of the BTF, details of which are published on <a href="https://www.britishtriathlon.org">www.britishtriathlon.org</a> . The cost of BTF Day Membership for this event is £5.00 per athlete which must be paid at registration by the Team Manager. Teams with members who are not fully paid up members of the BTF are not entitled to National Honours. |  |  |  |  |  |  |
| (on behalf of the above team) declare that I/we will abide by the rules of British Triathlon and that I/we are in suitable health to participate in the event. I/we accept that One Step Beyond Promotions and their friends and associates are not liable for any loss, damage claim or expense which may arise in consequence of my participation in the event, no matter how caused. I have read & agree to abide to the Terms & Conditions of Entry.   |  |  |  |  |  |  |
| Signed: Date:  |  |  |  |  |  |  |
| Please make cheques payable to: One Step Beyond Promotions Ltd   |  |  |  |  |  |  |

Send completed entry form & cheque to: CLUB RELAYS, One Step Beyond Promotions Ltd, White House Farm, Maltkiln Road, Fenton, Lincs. LN1 2EW Tel: 01427 718 888 Email relays@onestepbeyond.org.uk

