



# MARLEY FOUNDATION

EXPO

2.4KM FUN RUN (Dress up in full army gear)

2.4KM WALK (WITH DOGS)

## ENTRANCE FORM

- START AND FINISH AT HAMILTON CLUB, 5 CLEVEDON ROAD, SELBORNE.
- ENSURE TO ARRIVE AT LEAST 30MINUTES BEFORE THE STARTING TIME. RACE STARTING AT 13:30PM
- REGISTRATION WILL TAKE PLACE 30TH OCTOBER 2016 BETWEEN 12.00AM – 13.00PM
- THERE WILL BE WATER POINTS ALONG THE WAY FOR YOU AND YOUR DOGS
- FOR ANY ENQUIRIES, PLEASE CONTACT 0781912116, paigespencer1203@gmail.com
- ALL INSTRUCTIONS AND MARSHALS ARE TO BE OBEYED; NO LITTERING ALLOWED ON THE ROUTE

### HOW TO ENTER

COMPLETE THIS FORM AND BRING IT ALONG WITH YOU ON THE DAY OF THE EVENT, TO PAY AND REGISTER.

OR, EFT PAYMENTS ARE ACCEPTABLE. PLEASE BRING PROOF OF PAYMENT WITH YOU ALONG WITH YOUR REGISTRATION FORM. ONE PERSON PER REGISTRATION FORM.

**CAPITEC BANK; NAME: P SELLERS; ACCOUNT NUMBER: 1232664020; BRANCH: HEMMINGWAYS;**

**BRANCH CODE: 470010; REFERENCE: FULL NAME & SURNAME**

R20 PER ADULT FOR FIELD ENTRANCE (VISITOR)

R30 PER ADULT (FUN RUN)

R10 PER SCHOLAR

R30 PER ADULT WITH DOG (WALK)

**ALL DOGS MUST BE ON LEADS. IF YOUR DOG IS ANIMAL AGGRESSIVE, BE RESPONSIBLE AND USE A MUZZEL.**

NAME & SURNAME: \_\_\_\_\_

CONTACT NO.: \_\_\_\_\_ AGE: \_\_\_\_\_ CELL: \_\_\_\_\_

GENDER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

EMERGENCY CONTACT NAME: \_\_\_\_\_

CONTACT NO.: \_\_\_\_\_

TICK YOUR SELECTION: VISITOR: \_\_\_\_\_ FUN RUN: \_\_\_\_\_ WALKER: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### INDEMNITY

I declare above that I am medically fit and participate at my own risk and will not hold the organisers or the venue liable. Participants in this event and all the functions and events related thereof take part entirely at their own risk and agree by participation as well by the signature hereto, that they and their dependants do not have and will not institute any claims whatsoever against, and do hereby indemnify and hold harmless from all liability, the organisers, other participants, individuals, officials, marshals, local authorities or employees of such persons and any persons associated with them even in respect of any loss whatsoever which participants may suffer arising from any cause at all, regardless of whether or not the same shall have been caused directly or indirectly by negligence, albeit gross of any persons, persons signing this form as guardian of a minor consent to such a minor being bound by the afore going and further indemnify he organization and forementioned parties to the extent, if any, to which such minor is not bound. I understand and agree to abide by the above as stated in this entry form.

TO BE SIGNED BELOW BY PARENT/ GUARDIAN FOR PARTICIPANTS UNDER 14 YEARS OF AGE

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_