

Compton Hospice Registration Form

for
Carver Wolverhampton City Marathon 2010

PLEASE PRINT

First name.....Surname.....Title.....

Address

Postcode

Tel no. (Day).....(other).....

Email address.....

I have registered for
(tick relevant section).....Marathon.....
Half Marathon.....
Half Marathon Wheelchair.....
Half Marathon Relay Challenge.....
15 K Cycle Event.....

Please can you send me a
(circle as necessary)

T-shirt size	S	M	L	XL
or				
Running vest size	32-34"	34-36"	36-38"	38-40" 40-42"

DECLARATION

I have returned or am about to return a registration form and fee to Carvers Wolverhampton, or I have registered with carvers Wolverhampton online, for their 2010 Marathon.

**** I understand that single and group photographs may be taken of me at Compton events and I am happy for any photographs to be used for Compton Hospice marketing and future publications****

Signed (name of participant).....

We would like to keep you informed of future fundraising events. Please tick this box if you want to be added to our mailing list.

Please return Compton Hospice Registration form to:

Registered Charity No. 512387

Michelle Price, Events Fundraiser, Compton Hospice, The Cedars, 39 Compton Road West, Wolverhampton, WV3 9DW. 0845 2255 497