

CYCLE CHALLENGE

LAND'S END TO JOHN O'GROATS
14-25 MAY 2012

BOOKING FORM - FULL TRIP

Name _____

Address _____

Date of Birth _____ Gender: Male Female

Contact telephone number _____ Email address _____

Emergency contact name _____

Relationship to contact _____ Emergency contact phone number _____

Trip Requirements

Special requests/dietary requirements _____




Names of friends on the Cycle Challenge, if applicable _____

Trip £1,500.00
Fundraising target £1,000.00
Total per person £2,500.00

Non refundable deposit payable on registration £299.00

Please return your completed booking form with your £299.00 deposit to:

Lucy Wilkinson,
 The Bob Champion Cancer Trust,
 6 Old Garden House,
 The Lanterns, Bridge Lane,
 London SW11 3AD.

CREDIT CARD PAYMENT						
I authorise you to debit my *Mastercard/Visa/Maestro (*please delete as applicable). My card number is:						
MASTERCARD/VISA/MAESTRO Card No.						
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Issue No. (Maestro Only)	Start Date	Expiry Date	Security Code (3 digits on back of card)			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature _____						
Telephone Number _____						

Please note:

Every precaution is taken in ensuring your safety whilst under taking this challenge, however, outdoor activities have a certain element of risk of injury or death which cannot be eliminated. By signing below, you are stating that you are fully aware of these potential risks and accept them. We advise you to cover yourself with adequate personal insurance and cancellation insurance.

Signed _____

Date _____



THE BOB CHAMPION CANCER TRUST



The Bob Champion Cancer Trust in conjunction with Adventurous Ewe Ltd.