



Summer 5K Entry Form - Start Time 7pm



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| Name | |
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| | |
|---------|--|
| Address | |
|---------|--|

| | | | |
|---------|--|-------|--|
| Tel No. | | Email | |
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| EA Affiliated Club | | Male / Female |
|--------------------|--|---------------|

I declare that I will abide by the rules of UKA. I am over 11 years of age and accept that the organisers will not be liable for any injury, loss, damage or expenses which may arise in consequence of my participation in this event. I declare that I will not compete in the race unless in good health and that in any event I compete at my own risk.

| | |
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| Signed | |
|---------------|--|

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| Race Number | |
|--------------------|--|

(By Parent or Guardian if under 16)

Any personal data will not be retained after the end of the series and will not be passed to any third party