**ENTRY FORM PLEASE PRINT CLEARLY**

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| **Routes available are 22, 35, 55, 70 or 108 miles****Name & address of Team leader/Rider:** | Age | **Detail chosen Route:-**  | **Rider No. Office use** |
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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **Post Code** |  |  |  |  |  |  |  |  |
| Telephone number  | Mobile Number: |
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| **Print Email**  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Name of additional riders: | Age | Chosen Route 22,35 milesor55, 70, or 108 miles | ***Rider No. Office use*** |
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| **How much do you hope to raise in sponsorship** (circle) | £500, £400, £300, £200, £100, £50, £25, I am not |
| **Who are you raising funds for?** | Cancer Research UK (if other – please specify) |

Please enter me/us for the Rotary Dorset Bike ride in aid of Cancer Research UK. I understand that the Rotary Club of Westbourne (the organisers), or any of the sponsors shall not be liable for any injury, damage or loss howsoever suffered by participants as a result of their participation other than in respect of death or personal injury arising as a result of the organiser's or supporters negligence.  I / we enter according the terms on the web site.

**Signed: …………………………………………………. Date: ………………………**

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| **For Rider Registrations on Day of Event** | **Number** | **Total Cost** |
| 55, 70 or 108 mile route, **£45.00 per rider** |  |  |
| No. of Adults for 22 and 35 mile route, **£35 per rider** |  |  |
| Children under 16 yrs. **Free for all routes – but must be accompanied by a paying adult rider who will be responsible for them at all times.** |  |  |
| **Donation to Cancer Research UK (with Gift Aid)**It is hoped that all riders will donate at least £100 to CRUK | DonationYes/NoAmount £ |  |
| **Total paid:** |  |  |

Please provide the name of next of Kin: If there are different next of kin for the other riders, please provide these on a separate sheet.

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| Next of Kin’s Name |  |
| Next of Kin’s Telephone number |  |