



Jersey Hospice Care
Fundraising Limited



TOUR DE JERSEY CYCLE CHALLENGE 2011

ENTRY FORM

in aid of Jersey Hospice Care

Kindly supported by

RAWLINSON & HUNTER



ROUNDTABLE

Sunday 3rd July 2011

Communicare Centre, La Route des Quennevais, St Brelade

Choice of Routes: 5 miles (great for kids)

20 miles (fun for all the family)

50 mile (perfect for pushing yourself)

For further information please visit:

www.jerseyhospicecare.com

Tel: (01534) 510349 Email: fundraising@jerseyhospicecare.com

ENTRY FORM

Please complete one entry form per cyclist (in **block capitals**).

The closing date for postal entries is Friday 1st July 2011.

Please ensure that you enclose your £10 entry fee (cheques payable to Jersey Hospice Care Fundraising Limited) with this entry form.

Which event are you registering for (please tick)? 5 mile (great for kids)
 20 mile (fun for all the family)
 50 mile (push yourself)

Name of cyclist

Address

Postcode

Email address*

* to help us save on postage costs we prefer to communicate by email if possible

Phone number

Mobile number

Date of birth (if under 16)

Accompanying adult (under 16 only)

You will receive an acknowledgement of your entry together with further information about the cycle challenge. Your event water bottle and registration number will be given to you on the day of the cycle.

Please tick here if you would like to hear from Jersey Hospice Care Fundraising Limited about other events.

I understand and accept that Jersey Hospice Care Fundraising Limited cannot be held liable for any loss or damage to my property or personal injury to me or any other party arising in this cycle challenge.

Signed

Parent/guardian consent (to be given for cyclists under 16). I the parent/guardian of the above, consent to them participating in the 2010 Tour de Jersey.

Signed parent/guardian

Please return this application form and your registration fee to:

Tour de Jersey, Fundraising, Jersey Hospice Care, Clarkson House, Mont Cochon, St Helier, Jersey, JE2 3JB.