



## Sunday 13th May 2018

To register your child, fill out the enclosed registration form and return to your school as soon as possible. Walker packs will be delivered to school and sent home in book bags.

The **4 mile Schools Walk** from Freshwater Bay to The Needles Landmark Attraction is for all SWTW registered children and their families who wish to **participate** on the day of **Walk the Wight**. Children do not have to take part in this walk to complete their miles, although we'd love to see as many people as possible join us on the day.

Children who take part in the Schools Walk on **Sunday 13th May** will receive their **medal** at the end of the walk. Children who do not take part on the day and have completed their map will receive their medal at a special assembly held at their school.

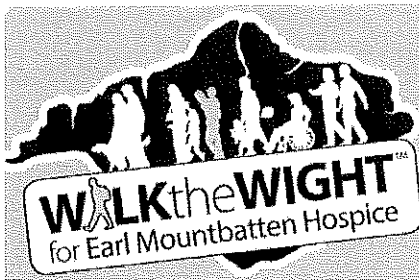
**Southern Vectis** are offering **FREE all day travel** on any of their services to all participants with Walker numbers. This offer has been extended to include the parents/guardians of children taking part in the Schools Walk.

Full details and event information of this walk are contained in the **SWTW walker pack** which each registered child receives.

Details of registration dates and walker pack delivery can vary with each school so contact your **SWTW coordinator** in your school for further information or call our Community Events Fundraiser, **Dani Johnson** or **Bryony Young**, Fundraising Assistant on **01983 217300**.

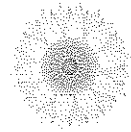
Many thanks for your support.

The Walk the Wight Team x



# Registration form Walk the Wight Sunday 13th May 2018

Sponsored charity walk for  
**Earl Mountbatten  
Hospice**



Earl Mountbatten Hospice  
Halbury Lane, Newport, Isle of Wight, PO30 2EF  
Registered charity no. 1039056  
Company number: 292967

Walk the Wight was founded by Bill Bradley & Frank Stevens Stay in touch: earlmountbattenhospice @EarlMBHospice

**ENTRY FORM** PLEASE PRINT CLEARLY IN BLOCK CAPITALS

## CHILD'S DETAILS

Please read our privacy statement below, which explains how we use and store your personal information.

**CHILD'S SCHOOL:** \_\_\_\_\_

First name: \_\_\_\_\_

Surname: \_\_\_\_\_

Home Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Male:  Female:

**NB: All walkers under 16 must be accompanied by an adult**

## PARENT'S DETAILS - You only need to enter an address if different from the above. Please enter your contact details in all cases.

Title: \_\_\_\_\_ First name: \_\_\_\_\_

Surname: \_\_\_\_\_

Address: \_\_\_\_\_

(if different from above) \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**We will use your email address (where provided) to send you information and updates about the event.**

### How we will use your personal information:

At Earl Mountbatten Hospice we take your privacy seriously. We aim to be clear when we collect your data and keep your details safe and secure. We will hold your personal data on our database and use it to administer your registration and any donation(s) and eligible Gift Aid that we receive from you. We will keep in touch with you periodically about our work, fundraising initiatives and opportunities to support us, as per your preferences expressed on this form. You can update your preferences at any time by contacting the fundraising team by emailing [info@whospice.org](mailto:info@whospice.org) or calling 01983 217300.

**Please let us know if you are happy to receive these communications:** Email  Phone  Text

For further details about how your personal information is used and stored please see our full privacy statement at [www.lwhospice.org/privacy](http://www.lwhospice.org/privacy) or ask us for a printed copy.

### CONDITIONS AND DECLARATION:

I understand that this is a fundraising event organised by and for the benefit of Earl Mountbatten Hospice. I agree that I will endeavour to raise as much money as possible for Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice.

To the extent permitted by the Unfair Contract Terms Act of 1977, neither Earl Mountbatten Hospice nor its sponsors or suppliers will be liable for any loss, damage, illness or injury whatsoever directly or indirectly occasioned by or resulting from negligence, wrongful act or default of Earl Mountbatten Hospice, its sponsors or their respective agents or from any other causes, including any act of God or the physical condition of the competitor. The applicant also warrants that he or she is fit to take part in Walk the Wight and will be fit on the day of the event. I grant my permission to Earl Mountbatten Hospice to use photographs, motion pictures, recordings, data and any other record of my participation in Walk the Wight for any legitimate purpose without remuneration.

**As the parent/legal guardian of the above named applicant, I accept the conditions**

Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Please return this form to your school before 1st March 2018**

Sponsored by

