



Tandem Parachute Jump Registration Form

If you wish to register please fill in the details below and return it to us with the registration fee of £50.00 (non refundable). Cheques and postal orders should be made payable to **MedEquip4Kids**.

Please state 2 preferred booking dates in order of preference (any weekend between March and November).

.....
Surname.....First name.....

Address.....
.....Postcode.....

Tel no (Daytime).....Evening).....

Email Address.....

Age.....Weight.....Height.....

Name of group leader (if applicable).....

How did you find out about the event (please be specific as it helps us evaluate the promotion of our events)?.....

Would you be interested in appearing in a local press release about this event?.....

On completion of your registration we will send you a 'Declaration of Fitness' form which you must bring with you on the day of your parachute jump.

Please read carefully:

(The Charity will not be held responsible for any personal injuries sustained whilst undertaking challenge events.)
I agree to the conditions set out in this pack and hereby commit to raise the £320 minimum sponsorship money required which will go towards MedEquip4Kids lifesaving work, this is in addition to my non refundable registration fee of £50.00. Please note the registration fee is non- refundable.

Signed.....Date.....

Please return to: MedEquip4Kids, Rico House, George Street, Prestwich, Manchester, M25 9WS

Tel: 0161 798 1600 Fax: 0161 798 1601

www.medequip4kids.org.uk info@medequip4kids.org.uk

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