Run England Registration Form Part 1: Disclaimer and Personal Details



THIS PORTION WILL BE RETAINED BY YOUR GROUP LEADER

PLEASE PRINT YOUR DETAILS CLEARLY, COMPLETE IN FULL AND RETURN TO YOUR GROUP LEADER. Please complete all sections

Full Nan			
Address			
		Postco	de:
Mobile/	ephone number:		
Email:			
Next of	(or person to contact in case of accident/illness):		
Next of	contact telephone number:		
Address	next of kin (if different from your own):		
	F	Postcode:	
How did	ou find out about the group?		
What would you like to get out of the group?			
☐ Get fitter ☐ Lose weight ☐ Run local events ☐ Improve ☐ Meet new running partners			
Other:			
Are you currently involved in any other form/s of exercise? Yes No			
If YES, v	at type and how often?		
Have yo	done any running before?		
If YES, v	at type and how often?		
Do you	ve any health considerations we ought to know about? $\; \square \; $	′es □ No	
If YES, p	ase explain:		
•	ffer from any of the following: Diabetes Heart proble		oint problems
•	ood pressure Asthma Back pain Previous injui	ries	
•	tion requiring medication:		
Other (p	ase detail)		
PLEASE	AD THE FOLLOWING AND SIGN BELOW:		
enjoyme entirely	nd Group Leaders are qualified leaders and are willing to sha of the sport with me. I confirm that I understand that partic my own risk and should consult my own doctor if suffering for the running injurious to my health.	ipation in	this group is
	Runners: I understand that I am joining a buggy running gro responsibility for the health & safety of the infant(s) and any		
Signed:		Date:	