

CONNEMARATHON CHARITY ENTRY FORM



FILL IN THIS
CHARITY ENTRY FORM TODAY...
you'll be glad you did!

Name:

Address:

Telephone:

Email:

Date of Birth:

Gender: M

F

Race:

Half Marathon

Full Marathon

Ultra Marathon

Signed:

Payment:

Euro Cheque enclosed

Credit Card

Credit Card Details

Card Number

Exp Date:

CSV

Name:

Participants must be at least 18 years of age. A signed entry form will be considered as a declaration that you will compete on foot and run or walk entirely at your own risk. No dogs or following cycles allowed.

YOUR ENTRY FEE INCLUDES

Courtesy coach to and from various accommodation centres;
Guaranteed Race Entry; Numerous Aid and Refreshment Stations;
Finishers Medal; Souvenir Tee-shirt; Post Race Refreshments.

PLEASE SEND COMPLETED CHARITY ENTRY FORMS WITH
A CHARITABLE CONTRIBUTION OF €250 TO

**Cancer Care West,
University College Hospital,
Galway, Ireland.**

Please note:

There are a limited number of Charity places available. Your entry is only guaranteed when you receive confirmation from Cancer Care West that your contribution has been accepted. You will receive confirmation by post.

www.connemarathon.com

