WEETS FELL RACE

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MINIMUM AGE TO ENTER - 16 YEARS

FULL NAME	
CLUB	CLUB
DATE OF BIRTH AGE	DATE OF BI
EMAIL ADDRESS	EMAIL ADD
CATEGORY (CIRCLE BELOW AS APPROPRIATE)	CATEGORY
MEN MU18 MSEN M40 M45 M50 M55 M60 M65 M70	M75 MEN N
WOMEN WU18 WSEN W35 W40 W45 W50 W55 W60 W65	W70 WOMEN W
ADDRESS	ADDRESS
POST CODE	
PHONE NUMBER	PHONE NUM
MOBILE	MOBILE
EMERGENCY CONTACT	EMERGENC
PHONE NO	PHONE NO
 I accept the hazards inherent in fell running and acknowledge that I am entering and running this race at my own risk. I confirm that I am aware of the rules imposed on me by the Race Organiser and that I will comply with them. I confirm that I have read and will comply with the FRA "Requirements for Runners". I acknowledge and agree that I am responsible for determining whether I have the skills equipment ar fitness to participate in this event. I accept that neither the Race Organiser nor the Fell Runners Association shall be liable to me for any injury, loss or damage of any nature to me or my property arising out of my participation in this race (other than in respect of death or personal injury as a results of their negligence). I consent to publication of my name, club, race category, race number, finishing time and race position in race pre-entry and results lists. 	at my own risk • I confirm that with them. • I confirm that • I confirm that • I acknowledge fitness to parti v • I accept that r injury, loss or (other than in
SIGNED DATE	SIGNED

Competitor or, if under 18, Parent/Legal Guardian.

WEETS FELL RACE

MINIMUM AGE TO ENTER - 16 YEARS

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(CIRCLE BELC	OW AS APP	ROPRIATE	E)				
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VU18 WSEN	W35 W40	0 W45	W50	W55	W60	W65	W70
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Competitor or, if under 18, Parent/Legal Guardian.