OFFICAL ON YOUR BIKE 2010 REGISTRATION FORM

COMPLETE CLEARLY IN BLOCK CAPITALS, DETACH AND RETURN WITH YOUR ENTRY FEE TO Caroline Conway, 14 Reades Lane, Sonning Common, RG4 9LP. Cheques payable to SCPTA. £4 per person for cycle ride; £3 pp for health walk; £1 pp for playground cycle. Note: £5pp for on the day registrations for cycle rides (other than playground).

Participant Names (please give date of birth if under 16). Please tick chosen activity. The chosen length of cycle ride is for indication only. You may change on the day if you wish.

Name	D of B (if u 16)	Cycle 5.5 miles	Cycle 11 miles	Cycle 20 miles	Cycle Playground	Walk

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Group Leader/Parent/Guardian:

Forename:_____Surname: _____

Contact address for dispatch of entry information:

_____

_____

Telephone (including STD code) _____ Mobile no. during event_____

E-mail

DECLARATION

I agree to abide by the terms and conditions required by SCPTA for safe participation in 'On Your Bike 2010'

Name……Signature……

I do **not** agree to photos of any of the above being used in publications ……. (tick).

I enclose a cheque for £_____ in payment of entry fees

PLAYGROUND CYCLE ONLY

Do you intend to stay with your child? Yes/ No

Are you happy for the supervisors to provide water for your child Yes/ No
(If no, please provide suitable drinks in clearly labelled drinks container.)

I understand the supervisors' right to withdraw riders from the playground cycle if they are not cycling with due care or if their bikes are unsafe.

HOW DID YOU HEAR ABOUT THIS EVENT?

Please TICK below:

Cycled last year _____ via Sonning Common Primary School_____

Via Chiltern Edge School_____ via Henley Standard_____

Other school (pls indicate)_____