

SHREE JALARAM MANDIR - GREENFORD



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RAGHUVANSHI MAHAJAN LONDON "RAMA" Charity Registration Number: 1104605

SPONSORED CHARITY WALK - 25/10/2015

PARTICIPANT REGISTRATION FORM	Walker Number
	For office use

PLEASE COMPLETE ALL SECTIONS IN CAPITAL LETTERS

First Name and Surname

Full Name:

Address:

Post Code:

Home Telephone:

Mobile Telephone:

Medical Condition if any

Medication if any

Next of kin

First Name and Surname

Full Name:

Telephone Numbers:

Any other relevant information

DECLARATION

I declare that I have no known contra-indications and I am fit to undertake this walk.

I declare that the information given by me is correct to the best of my knowledge.

PRINT NAME _____ Signature _____

DATE: ___/___/___ >>>>>>>>>> NOW RETURN THIS FORM TO MANDIR