NEWRYCITYMARATHON.COM

NEWRY CITY MARATHON

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Entry Form - Sunday 29th May 2016

E: **admin@newry.com**
W: **www.newrycitymarthon.com**

/Newry City Marathon 2016

NEWRY CITY CENTRE MANAGEMENT

NEWRY CREDIT UNION LIMITED

FUN RUN

ENTRY FEE £3 / £10 Per Family (Max 4 People)

All entrants under 16 must be accompanied by an adult.

Completed forms must be returned to:

Newry Credit Union, 70-72 Hill Street, Newry, BT34 1BF

Upon receipt, each entrant will receive a race number.

OPENING HOURS:

MON: CLOSED
TUE: 9:30am – 5:00pm
WED: 9:30am – 5:00pm
THUR: 10:00am – 5:00pm
FRI: 9:30am – 5:00pm
SAT: 9:30am – 4:00pm

LAST ENTRY APPLICATION FORM RECEIVED WILL BE 30MINS BEFORE CLOSING

ALL ENTRANTS MUST COMPLETE THIS SECTION

SURNAME

FIRST NAME

ADDRESS

TOWN / CITY

COUNTY

COUNTRY

POSTCODE

TELEPHONE (HOME)

MOBILE

EMAIL – Please write in Block Letters

Date of Birth

Age on 29th May 2016

PLEASE SPECIFY ANY MEDICAL CONDITIONS YOU MAY HAVE:

The Competitor, who will be of the stipulated age on the 29th May 2016, acknowledges that he/she will be competing entirely at his/her own risk and to extent permitted by the Unfair Contract Term Acts 1977. Newry City Centre Management event organisers of Newry City Marathon will not be liable for any loss, damage or illness or injury whatsoever directly or indirectly occasioned by or resulting from the negligence, wrongful act or default of the committee, its members, employees or agents or from any other cause including an act of God or the physical condition or the competitor.

The entry fee must accompany this form.

SIGNATURE OF PARENT:

PLEASE MAKE CHEQUE PAYABLE TO: NEWRY CREDIT UNION

OFFICIAL USE ONLY	
CHEQUE ☐	CASH ☐

RACE NUMBER_____