

Haywards Heath / Ardingly/ Weir Wood/ Crowborough Triathlons

Entry Form



Event	Date	Distance	Entry Fee	Put 'X' to enter
Haywards Heath Sprint	29th April	384m /25km/ 5km	£35	
Haywards heath Novice	29 th April	192m/ 14km/ 2.5km	£30	
Ardingly Sprint	3 rd June	500m / 23km/ 5km	£35	
Ardingly Novice	3 rd June	200m / 23km/ 2.5km	£30	
Ardingly Duathlon	3 rd June	2.5km/ 23km/ 5km	£27	
Weir Wood Sprint- Open water- Wetsuits required.	21 st June (Thurs)	750m/ 19km/ 5km	£28	
Crowborough Sprint	16 th September	750m/ 20km/ 5km	£35	
Crowborough Novice	16 th September	200m/ 20km/ 2.5km	£30	
Crowborough Duathlon	16 th September	2.5km/ 20km/ 5km	£27	
Crowborough Aqua LONG	14 th October	800m/ 8km	£19	
Crowborough Aqua SHORT	14 th October	500m/ 5km	£16	

All details on the website: www.hedgehogtri.co.uk

No confirmation will be sent, check 'Entries So Far' on the website
(£3 refund on race day to BTF licence holders)

Cheques payable to 'Hedgehogtri',

Number of events	
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Amount submitted	£____.____
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Post to: Hedgehogtri Events, 7 Stonedene Close, Forest Row, E Sussex, RH18 5DB.

PLEASE WRITE IN CLEAR CAPITALS

Surname		First Name	
Address			Town
Postcode	H Tel	Mob	
Email <small>(used for communication – please ensure correct)</small>			
DOB <small>(Note all ages are as of 31/12/12)</small>		M/F	Team
State any Medical conditions		Your time for 500m swim <small>(Sprint and Novice events only) enter as 00:00 (Note: Novice please enter time for 500m NOT 200m)</small>	
Cycle type <small>(Please circle)</small>	Road / Mountain	BTF Licence number <small>(If member)</small>	
Triathlons competed in: First / 3 or less / 4 or more <small>(please circle)</small>			

Charity Partner



Demelza
Hospice Care for Children

A minimum of 25pence from your entry fee will go to our charity partner. Please help to raise more through sponsorship

Race Declaration

I understand and agree that the above person participate in the event entirely at their own risk and that no responsibility whatsoever shall attach to any event sponsors, race directors or any person involved in the organisation of the event for any injury, accidents, loss or damages suffered by the named person in, or by reason of the event, however such may be caused. The named person above is physically capable of competing in the event and they do entirely at their own risk. The parent/Guardian has read and understood the race declaration and the terms of entry/ conditions of race entry. Conditions of entry on website www.hedgehogtri.co.uk/2012/TandC.html

Signature	Print name	Date
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All race information is on the website www.hedgehogtri.co.uk

Please print off the sponsor form below – Please assist us in raising money for this local charity



Demelza
Hospice Care for Children

Sponsorship and Gift Aid Declaration Form

NAME :

Address:

..... **Postcode:**

Event: **Date:**



I will be taking part in a **Triathlon** and will be raising money for Demelza Hospice Care for Children.

PLEASE SPONSOR ME!!!

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Please use Gift Aid and you can make your donation worth more. For every pound you give to us, we get an extra 28 pence from the Inland Revenue, AT NO EXTRA COST TO YOU. So just tick the ✓ box on the reverse. It really is that simple to make your donation all the more valuable!

Thank you.

To qualify for Gift Aid, what you pay in income tax or capital gains tax must at least equal the amount we will claim in the tax year.

Please return this form with the sponsorship money to: Demelza Community
Red Lion House
Magham Down
East Sussex
BN27 1PN

Please make all cheques payable to **Demelza**.

Registered Charity No: 1039651

To be completed by the charity:

Date moneys received				
Total donations				
Total amount of Gift Aid donations	£	X 22/78=	£	tax reclaimable

