



2009

Braveheart Rides 2009 Parental Consent Form

www.braveheartcyclingfund.com

to be completed by parent or guardian of competitors aged under 18 years and handed in at registration before race number will be issued

Parent/Guardian's details		Ride entered _____	Date _____
Surname _____	Forename _____		
Address _____			Postcode _____
Telephone	Home _____	Work _____	
	Mobile _____		
Name of child _____		Date of birth _____	
_____		_____	
<p>I agree to my Son/Daughter/Ward taking part in this event entirely at his/her own risk and without any liability whatever on the part of the Braveheart Cycling Fund, Walkers Cycling Services Ltd or any of those assisting the aforementioned organisations, in respect of any injury, loss or damage suffered by him/her, however so caused.</p>			
			Signature _____