

Event Details

Application Form

The 5 km - Run for dreams -

business name here:

Personal Details

If you are entering as part of a corporate team please put the

If you are entering as part of a school/college team then please

Please send entry form with cheque payable to Run for Dreams to: FREEPOST. NAT6629. Wolverhampton, **WV10 6BR** Tel: 01902 378 595 12 years and over £10 - which will include a welcome pack with 'Run for Dreams' T-Shirt. Children 8 - 11 years £7 - which will include a welcome pack with 'Run for Dreams' T-Shirt. All finishers will receive a goody bag and a medal Prizes 1st Wheelchair Racer 1st female to finish 1st youngster between 8 & 11yrs 1st male to finish 1st youngster between 12 & 16yrs Best fancy dress Cheque (cheques made payable to Run for Dreams) Credit/Debit Card Details. Please debit my Debit/Switch/Visa/Mastercard by the amount of £.....

To ensure the correct T-shirt size, please ensure applications are back ASAP:

This should be sent to Promise Dreams at the address listed on this form.

Gift Aid it (Tick Here)

Surname	
Address	
Postcode	(we will need this for Gift Aid)
Minimum Please tick app	age is 8 as at the date of the even
Age 8 - 11	3
	petween the ages of 8 - 11yrs must be by a fee paying adult aged 18 or over.
Tel No.	
TELLING.	•••••
Mobile No.	
Mobile No.	hich best fits your running ability
Mobile No. Please circle w	hich best fits your running ability:
Mobile No. Please circle w	hich best fits your running ability: Regular Runner / Club Runner / Wheelchair Race
Mobile No. Please circle w Fun Runner /	, , ,
Mobile No. Please circle w Fun Runner /	Regular Runner / Club Runner / Wheelchair Race
Mobile No. Please circle w Fun Runner / Parent/Guard	Regular Runner / Club Runner / Wheelchair Race
Mobile No. Please circle w Fun Runner / Parent/Guard First Name	Regular Runner / Club Runner / Wheelchair Race
Mobile No. Please circle w Fun Runner / Parent/Guard First Name Surname	Regular Runner / Club Runner / Wheelchair Race
Mobile No. Please circle w Fun Runner / Parent/Guard First Name Surname	Regular Runner / Club Runner / Wheelchair Race
Mobile No. Please circle w Fun Runner / Parent/Guard First Name Surname Address	Regular Runner / Club Runner / Wheelchair Race

Child

In the event that you find you cannot take part in the run, it might be that you would like to send a donation anyway.

If you have a story to tell about your reason for 'running for dreams' we would love to hear from you, please email: info@promisedreams.co.uk