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## "Action Activism"



## 105km "Walk for freedom" Application on {5-6<sup>th</sup> AUGUST – 81% full Moon} or 12-13th august 2023

APPLICANT IN	N ISSUED CARD NUMBER																							
First Name:			Surname:						Title:															
Date of birth:	Gend	М	Mobile on Walk:																					
E-																		T			T		T	
Street Address:				'																				
Town/City:	Count	County:					Post Code:																	
Nationality:	City of Birth:					Languages:																		
TEAM OR GROUP INFORMATION																								
Please for reasons of safety walk in a group with others, sharing navigation aids and mobiles:																								
Team/Group Name:																								
Phone 1:	Name	2:																						
Phone 2:	Name:																							
Phone 3:	Name:																							
EMERGENCY CONTACT																								
Next of Kin or Lawyer:																								
Address:						Phone:																		
Town/City:		State:				ı	Post Code:																	
Relationship:																								
	Di	ISTANCES	, Day	S, ANI	SPO	ORTS	Т Ѕні	RTS	5															
Part Walk or Full Walk: Part Wal						alk?	Ik? YES/NO NO																	
Brighton at 5:30? YES/NO	lay Walk? YES/NO					Saturday Night Walk? YES/NO																		
Nearest Town: :		Train Stations:				F	Post Code:																	
Sports T Shirt Size: M	L XL	XX	L	Pric	es:	Sta	tus:	En	npl	lo	ye	d:	£3	0.	00	) Δ	syl	luı	m £	£15	.0	0		
Entrance Fee Minimum (additional Donations Welcome): £15:00																								
AS A WALKER YOU WILL E	E RAISING I	PUBLIC A	WAF	RENES	SS AI	ND R	AISIN	١G	FUI	NE	OS 1	ГО	НЕ	LP	TH	10	SE I	Ν	RE/	AL N	IEE	D		
I confirm that I am fit and he responsibility and mine alon I fully understand the need f I pledge to raise money by s funds payable to "ZHRO Ltd" Applicant Photo-Sponsorship PHOTOGRAPH, AND PURCH	e. If in any for suitable ponsorship or @ Tide o forms wil	doubt of clothing or other Bank Solution	contag, fo er do ort C oplied	otweenation	our o ear, o on fr 23- rtly	loct extra om 69-7 – <u>SC</u>	or fo a soc frien '2 Ac <b>) PLE</b>	r a ks, ds co	dvi , fo an unt	ice d t:	e no d a pro 19:	ov nc of 14	v. d dı ess 69 <b>/ A</b>	rin ior 21 <b>P</b> /	k fonal	or co	suc onn <b>OR</b>	ch neo	an ctio	en ins.	de	avc		r
Date:	e: Signature:																							