

*St Andrews Hospice*  
**Annapurna Trek 2017**  
**30<sup>th</sup> Oct - 09<sup>th</sup> Nov**



*Sponsored by*  
*Ellen Kane Trust*  
**Registration Form**

Full Name as on Passport.....

Address.....

.....Post Code.....

Date of Birth.....

Tel. Daytime..... Tel. Evening.....

Mobile No..... E-Mail.....

Place of Employment/Occupation.....

Passport Details

Passport Number..... Place of Issue.....

Date of Issue..... Date of Expiry.....

In registering, I am confirming my undertaking to raise the minimum sponsorship level of **£200 non refundable deposit + £3,300 = Total £3,500** and remit all sponsorship money raised to St. Andrews Hospice as required. I understand that I must raise £2000 by Monday 14<sup>th</sup> August 2017, with the full balance due by Monday 16<sup>th</sup> October 2017.

I declare that I am medically fit, I will be age 21 or over on the day of departure, I will abide by the instructions of the Event Group Leader and understand that I am entering entirely at my own risk.

I enclose my **registration fee** of **£200** (*make cheques payable to: St. Andrew's Hospice Adventure A/C*) and I accept the conditions of entry for '**Annapurna Trek 2017**'

Signed.....

Dated.....

Contact - Bobby Mason

On - 01236 766951

[bobby.mason@standrews.scot.nhs.uk](mailto:bobby.mason@standrews.scot.nhs.uk)