Wolds Challenge Hike Entry Form



Send to: To WOLDS CHALLENGE 2024, 1 Castle Drive, South Cave, East Yorkshire HU15 2ES

Tel: 07803 247324 Email: info@fells-marathon.org.uk

Category - Please Tick One

Scouts

ONLY ONE TEAM PER ENTRY FORM PLEASE NO ENTRIES WILL BE ACCEPTED WITHOUT FULL PAYMENT

Competition Status – Please Tick One

Competing Team

Explorers					Non Competing – Leader Supported					
Network			Non (Non Competing – Explorers on S		out Route	?			
Team Name:										
	Team Mem			nber Names	Tea	Team Member Telephone Number (for event)				
1										
2										
3										
4										
5										
6										
7										
District:			Scout Group:			Troop / Unit Na	ma·			
			occur oroup.			Troop, omerican				
Leader in Charge – Contact details: Payment Type (please tick)										
Namo						, payable to 'Blacktoft Beacon District Scouts'				
A dalue es						-59 Account Number: 00106941				
Mobile No.	:				Amo	Amount to be paid			Total	
Email Addr	ess:	s:			Your	Young people @ £10 per head		Quantity	iotai	
Signature:						Badges for Leaders @ £1 per badge				
					2446	, , , , , , , , , , , , , , , , , , , ,		TOTAL	£	
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