

Rotary Shakespeare Marathon and Half Marathon

SUNDAY, 28<sup>th</sup> April 2019

Start time – 9.00 am

TRANSFER REQUEST FORM

Transfers to another person are permitted up to 21<sup>st</sup> April 2019 with the organisers consent. To transfer an entry to another runner this Transfer Request Form must be completed and signed by the existing entrant AND by the transferee and the form sent to the Shakespeare Marathon PO Box address shown at the bottom of this form together with a cheque for £5.00.

EXISTING ENTRY DETAILS – TO BE COMPLETED BY THE TRANSFERER

I am now unable to compete in the event and I wish to transfer my entry to another person.

MY EXISTING ENTRY IS IN THE MARATHON [ ] HALF MARATHON [ ] (tick as appropriate)

SURNAME ..... FORENAME/S .....

Telephone ..... Post code ..... RACE NUMBER (if known).....

I will not seek repayment of my entry fee from the organisers and I authorise the under-mentioned person to take my place.

Signed ..... Date .....

NEW ENTRY DETAILS – TO BE COMPLETED BY THE TRANSFEEE

I APPLY TO ENTER THE MARATHON [ ] HALF MARATHON [ ] (tick as appropriate)

SURNAME ..... FORENAME/S .....

ADDRESS ..... Post code .....

EMAIL ..... Telephone ..... Age on the day of Race..... MALE

[ ] FEMALE [ ] (tick as appropriate) Minimum age for Marathon 18 Years and Half Marathon 17 Years.

UK ATHLETICS AFFILIATED CLUB (if applicable) .....

I agree to the Terms of Entry which I have read and this Transfer Request and I understand no further transfers are permitted.

Signed ..... Date .....

Please enclose a cheque for £5.00 payable to 'The Rotary Club of Stratford-upon-Avon'

Send this completed request form to: Shakespeare Marathon, PO Box 512, Cheadle, Staffs, ST10 4RJ

If you require a receipt, please send a stamped self-addressed envelope.