

Registration Form



The Walk will include teams of Cancer Survivors, their families, friends and supporters, any member of the team can be team leader.

Individuals and groups of friends are also welcome to take part.

Team Leader Details:

Name: _____

Address: _____

Contact Number: _____

Email Address: _____

Number of team members: _____

Name of Survivor: _____

In order to celebrate our survivors please give us a brief account of how **Tuam Cancer Care** helped and supported you on your cancer journey.

Please tick if you are happy for us to use this information to introduce you and your team, at the beginning of the walk, on the day.

T-shirts from last year can be reused. If t-shirts are required - please indicate quantity and t-shirt size below

Survivors t-shirt size (White)

Small Medium Large X-Large XX-Large

Team members t-shirts (Royal Blue)

Please indicate quantity of and size below

Small Medium Large X-Large XX-Large

Please indicate how you propose to raise funds:

Sponsorship Cards

Running small event in your own area, e.g. coffee mornings, cake sales etc

Online fundraising e.g. idonate, just giving etc

Other

If you are promoting your event (website/social media/idonate, let us know the link, so we can promote it on ours:

Please contact Eimear on 093 28522 or fundraising@tuamcancercare.ie if you have any questions or to discuss plans you may have.

Tick here to give us permission to share this link and photos relating to the event on our Facebook page

In accordance with Data Protection Legislation that came into force in May 2018, we are only able to contact you, regarding upcoming events or to send you our newsletter if you have provided prior written consent

Tick here if you would like to receive our Newsletter

Tick here if you would like to receive information on upcoming events

How would you like to receive this information? Email Post

New Data Protection legislation requires us to have your consent to use your photo. By giving consent you are allowing you / family/team members to appear in photos which may be used to promote Tuam Cancer Care in future campaigns. The photos may also appear on our newsletter and social media.

I hereby give consent for any photos in which I/my family/team members are included in to be used as outlined above. I understand that I may retract my consent at any time by contacting the Centre on 093 28522.

Signature: _____ **Date:** _____

The Tuam Cancer Care Privacy Policy and Statement, along with our Sponsor Engagement Letter is available on our website www.tuamcancercare.ie or by contacting the Centre on 093 28522.

Declaration

I understand that I enter the Survivor's Celebration Walk at my own risk and that Tuam Cancer Care will not be held responsible for any property lost, mislaid or stolen on the route or any facility area or for any loss or injury sustained by me or any team member in the course of the event or in fundraising connected with the event.

Yes

Signature: _____ Date: _____

To register online, log onto clr.ie/127252