



PLEASE RETURN FORM TO:
Thompson Taraz Charitable Foundation, 3 New Burlington Mews, Mayfair, London, W1B 4QB

PERSONAL DETAILS (PLEASE USE BLOCK CAPITALS)

FIRST NAME:

SURNAME: BTA NUMBER:

DATE OF BIRTH: / / SEX: MALE: FEMALE:

OCCUPATION:

EMPLOYER:

ADDRESS:

POSTCODE: NATIONALITY:

TEL. HOME: MOBILE:

E-MAIL:

IF YOU ARE A MEMBER OF A GYM/HEALTH CLUB PLEASE STATE WHICH ONE _____
 HOW DID YOU HEAR ABOUT THE LONDON TRIATHLON? _____
 IS THIS YOUR FIRST TRIATHLON? YES NO

 Individual Super Sprint Individual Sprint Individual Olympic

PLEASE NOTE: All Olympic competitors will race with their own age / sex unless you specifically wish to race in mixed sex and age group, if so tick here

Sprint Team Relay Olympic Team Relay

Team Name _____
 (Each team member to complete a separate form. Send all three forms together)

Team Captain

Corporate Tri Challenge (Please tick if all Team members work for the same company)

I enclose a cheque for my fundraising deposit of £70 (Seventy pounds) made payable to "Thompson Taraz Charitable Foundation"

or

I have submitted my fundraising deposit of £70 (Seventy pounds) to Thompson Taraz Charitable Foundation via Justgiving (<http://www.justgiving.com/thompsontaraz>).

I declare that I accept the conditions of entry as stated by Thompson Taraz Charitable Foundation
 Any athlete needing special requirements (relating to a disability or medical condition) must contact The London Triathlon pre race.

SIGNATURE: _____ DATE: / / 2008



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TERMS AND CONDITIONS

I, _____, would like to take a Charity Bond place in the Mazda London Triathlon 2008 on behalf of Thompson Taraz Charitable Foundation

By signing the entry form I accept that;

1. I understand that each Charity Bond place costs Thompson Taraz £175. I therefore pledge to raise a minimum of £400 (**excluding gift aid**) to cover the cost of the place and to support the work of the charity.
2. I agree to pay a non refundable deposit of £70 to secure my Charity Bond place. This deposit is included as part of my total fundraising.
3. I understand that if I am unable to raise a minimum of £400 I will be expected to make up the shortfall by 30 September 2008.
4. I agree that all money raised in the name of Thompson Taraz Charitable Foundation will be passed directly onto the Charity
5. I agree to inform Thompson Taraz Charitable Foundation **immediately** if I become aware of any reason why I cannot participate in the event. Charity Bond places can be reallocated up until 1 June 2008. After this date, Thompson Taraz Charitable Foundation loses the place
6. If I am given a Charity Bond place by Thompson Taraz Charitable Foundation, I declare that I am in a suitable physical condition to undertake the necessary training as well as to participate in the event. I will seek medical assistance if I have any health concerns prior to participating in the event. Thompson Taraz Charitable Foundation is in no way responsible for my health, fitness or ability to participate in the event, or for any injuries I may sustain in training or during the event.

I confirm that I have read and agree to the Terms and Conditions stated above.

SIGNATURE: _____

DATE: / / 2008