Sponsorship Form

Participant name:	**Telephone Number:**
Event: 30walks in 30 days	

Sponsor's Name	**Tel. No.**	**Amount**	**Paid?**
	Total:	£	

In association with:

Be Active. The Health Improvement Commission

Kindly supported by:

APPLEBY

OFFSHORE LEGAL ADVICE & SERVICES

Cheques should be made payable to 'Les Bourgs Hospice'
Thank you for your support. Every penny counts.

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