

Sponsored charity walk for



Registered Charity No. 1039086 Company number: 2929267

Walk the Wight was founded by Bill Bradley & Frank Stevens

Stay In touch: Jearl.mm @EarlMBHospice

It's the 25th Anniversary of Walk the Wight!

Schools Walk the Wight is a fantastic scheme that links everyday walking activities for the whole family to Earl Mountbatten Hospice's biggest fundraising event, Walk the Wight. The aim is for children to complete a whole Walk the Wight (26 miles) by clocking up their miles during every day walking activities, whilst raising funds for the Hospice.

This year SWTW will be celebrating the 25th anniversary of Walk the Wight with a silver fancy dress theme and a banner competition.

How it Works

Taking part is easy - just follow these simple steps towards your child's Schools Walk the Wight Medal!

- Register your child online (preferable) at www.walkthewight.com by Friday 24th April, or complete the registration form overleaf
- Your child will receive their walker pack containing their Schools Walk the Wight map and stickers, unique walker number, sponsorship form and event information
- Encourage your child to collect sponsorship
- Start walking!
- Your child earns 1 sticker for their map for each unit walked (1 unit = 1 mile / 30 mins walk)

Walk the Wight Sunday 10th May

- Join us for the 4 mile Schools Walk; from Freshwater Bay to The Needles Landmark Attraction at Alum Bay (this walk is optional)
- Please note, all children must be accompanied on the Schools Walk by a responsible adult. Only participants with walker numbers will receive a medal on the day.

Support the Islands only hospice!

This year all children who raise over £20 in sponsorship money will receive an Earl Mountbatten Hospice Frisbee. We hope this will give children a goal and an extra incentive to raise sponsorship. Frisbees will be distributed through your child's school once sponsorship money and forms have been returned to us.

We hope you'll join us for Schools Walk the Wight 2015
It's great for children, great for schools and great for the community!



Application form

Schools Walk the Wight 2015



Walk the Wight was founded by Bill Bradley & Frank Stevens



Sponsored charity walk for



Registered Charity No. 1039026 Company number: 2929767

Earl Mountbatten Hospice Halberry Lane, Newport, Isle of Wight, PO30 2ER

THANK YOU FOR JOINING US ON OUR 25TH ANNIVERSARY

Walk the Wight has raised over £3 million in its lifetime and this year our target is to raise a further £250,000 towards end of life care at Earl Mountbatten Hospice. Your support will help ensure that the Islands only hospice continues to offer its services, free of charge, for current and future generations.

ENTRY FORM PLEASE PRINT CLEARLY

\sim	L	11	De	DE	TA II	0
	F-3			111	. 41	-

Title Summe: Address: School Date of birth:	,	
Address: School Date of birth:	Title	First name:
School Date of birth:	Surname:	
School Date of birth:	Address:	
School Date of birth:		Postcode:
Parents Details Title First name: Postcode: P	School	
Parents Details Title First name: Surname: Address: Address: Telephone: Email: CONDITIONS AND DECLARATION: Lunderstand that this is a fundraising event origanised by and for the benefit of a fundraised the property of	Date of birth:	/ / Male: Female:
Title First name: Address: CONDITIONS AND DECLARATION: Lunderstand that this is a fundraising event organised by and for the benefit of Earl Mountbatten Hospice. I agree that I will endeavour to raise as much money as possible for Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice or its sponsors or suppliens will be liable for any loss. Candens or injury whatever directly or inju		NB: All walkers under 16 must be accompanied by an adult.
Title First name: Address: CONDITIONS AND DECLARATION: Lunderstand that this is a fundraising event organised by and for the benefit of Earl Mountbatten Hospice. I agree that I will endeavour to raise as much money as possible for Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice or its sponsors or suppliens will be liable for any loss. Candens or injury whatever directly or inju	Parente I	Dataile
CONDITIONS AND DECLARATION: Lunderstand that this is a fundraising event organised by and for the benefit of Earl Mountbatten Hospice. I agree that I will endeavour to raise as much money as possible for Earl Mountbatten Hospice. I will apply all sponsorship money to Earl Mountbatten Hospice. I will apply all sponsorship money to Earl Mountbatten Hospice. I will apply all sponsorship money to Earl Mountbatten Hospice to reliable for any losa, dramage, ilines or injury whatsoever directly or indirectly occasioned by or resulting from negligence, wrongful act or default of Earl Mountbatten Hospice. I st sponsors or suppliers will be liable for any losa, dramage, ilines or injury whatsoever directly or indirectly occasioned by or resulting from negligence, wrongful act or default of Earl Mountbatten Hospice. It sponsors or take representation and will be fit on the day of the event. It grant my private and the physical condition of the competitor. The applicant also warrants that he or she is fit to take part in Walt the Wight tand will be fit on the day of the event. It grant my permission to Earl Mountatten Hospice to use photographs, motion pictures, recordings, adta and any other record of my latticipation in Walk the Wight for any legislimate purpose.	i dielles L	
CONDITIONS AND DECLARATION: Lunderstand that this is a fundraising event organised by and for the benefit of Earl Mountbatten Hospice. I agree that I will endeavour to raise as much money as possible for Earl Mountbatten Hospice. I will apply all sponsorship money to Earl Mountbatten Hospice. I will apply all sponsorship money to Earl Mountbatten Hospice. I will apply all sponsorship money to Earl Mountbatten Hospice to reliable for any losa, dramage, ilines or injury whatsoever directly or indirectly occasioned by or resulting from negligence, wrongful act or default of Earl Mountbatten Hospice. I st sponsors or suppliers will be liable for any losa, dramage, ilines or injury whatsoever directly or indirectly occasioned by or resulting from negligence, wrongful act or default of Earl Mountbatten Hospice. It sponsors or take representation and will be fit on the day of the event. It grant my private and the physical condition of the competitor. The applicant also warrants that he or she is fit to take part in Walt the Wight tand will be fit on the day of the event. It grant my permission to Earl Mountatten Hospice to use photographs, motion pictures, recordings, adta and any other record of my latticipation in Walk the Wight for any legislimate purpose.	ļ	
CONDITIONS AND DECLARATION: Lunderstand that this is a fundraising event organised by and for the benefit of Earl Mountbatten Hospice. I agree that I will endeavour to raise as much money as possible for Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice nor its sponsors or suppliers will be liable for any loss, damage, illness or injury whatsoever directly or indirectly occasioned by or resulting from negligence, wrongful act or default of Earl Mountbatten Hospice and special and Earl Mountbatten Hospice. I will pay all sponsors or titel respective agents or from any other causes, including any act of Cood or the physical condition of the compelitor. The applicant also warrants that he or she is fit to take part in Walk the Wight and will be fit on the day of the went. I grant the permission to Earl Mountbatten Hospice to use photographs, motion pictures, recordings, data and any other record of in Walk the Wight for any helitimate purposes	Title	First name:
CONDITIONS AND DECLARATION: Lunderstand that this is a fundraising event organised by and for the benefit of Earl Mounthatten Hospice. I agree that I will endeavour to raise as much money as possible for Earl Mounthatten Hospice. I vill pendeavour to raise as much money to Earl Mounthatten Hospice. I vill pendeavour to raise as much money to Earl Mounthatten Hospice. I vill pendeavour to raise as much money to Earl Mounthatten Hospice on its sponsors or suppliers will be linable for any loss. To the extent permitted by the Unfair Contract Terms Act of 1977, neither call Mounthatten Hospice on its sponsors or suppliers will be linable for any loss. damage, illness or injury whatscever directly or indirectly occasioned by or resulting from negligence, wrongful act or default of Earl Mounthatten Hospice, it's sponsors or their respective agents or from any other causes, including any act of God or the physical condition of the competitor. The applicant also warrants that he or she is fit to take part in Walk the Wight and will be fit on the day of the event. I grant may permission to Earl Mountatten Hospice to use photographs, motion pictures, recordings. Signed I have read and agree to the conditions IF UNDER 16: As parents/guardians we accept the conditions We would like to keep you informed about our work at Earl Mountbatten Hospice. If you do not wish to receive further correspondence, plese tick here	Surname:	
CONDITIONS AND DECLARATION: Lunderstand that this is a fundraising event organised by and for the benefit of Earl Mountbatten Hospice. I greet that I will endeavour for raise as much money as possible for Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten by the Unfair Contract Terms Act of 1977, neither Earl Mountbatten Hospice nor its sponsors or suppliers will be liable for any loss, damage, illness or injury whatsoever directly or indirectly occasioned by or resulting from negligence, wrongful act or default of Earl Mountbatten Hospice, it's sponsors or their respective agents or from any other causes, including any act of God or the physical condition of the competitor. The applicant also warrants that he or is he is fit to take part in Walk the Wight and will be fit on the day of the event. I grant my permission to Earl Mountbatten Hospice to use photographs, motion pictures, recordings, data and any other record of my participation in Walk the Worls for any leafitnate purpose	Address:	
CONDITIONS AND DECLARATION: Lunderstand that this is a fundraising event organised by and for the benefit of Earl Mountbatten Hospice. I agree that I will endeavour to raise as much money as possible for Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice on it is sponsors or suppliers will be liable for arry loss, damage, illness or injury whatsoever directly or indirectly occasioned by or resulting from negligence, wrongful act or default of Earl Mountbatten Hospice, it's sponsors or their respective agents or from any other causes, including any act of God or the physical condition of the competitor. The applicant also warrants that he or she is fit to take part in Walk the Wight and will be fit on the day of the event. I grant my permission to Earl Mountaten Hospice to use photographs, molton pictures, recordings, data and any other record of my participation in Walk the Wight for any legitimate purpose		Postcode; Postcode;
CONDITIONS AND DECLARATION: Lunderstand that this is a fundraising event organised by and for the benefit of Earl Mountbatten Hospice. I agree that I will endeavour to raise as much money as possible for Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice. To the extent permitted by the Unfair Contract Terms Act of 1977, neither Earl Mountbatten Hospice nor its sponsors or suppliers will be liable for any loss, damage, illness or injury whatsoever directly or indirectly occasioned by or resulting from negligence, wrongful act or default of Earl Mountbatten Hospice, it's sponsors or their respective agents or from any other causes, including any act of God or the physical condition of the competitor. The applicant also warrants that he or she is fit to take part in Walk the Wight and will be fit on the day of the event. I grant my permission to Earl Mountbatten Hospice to use photographs, motion pictures, recordings, data and any other record of my participation in Walk the Wight for any leading the purpose.	Telephone:	
Lunderstand that this is a fundraising event organised by and for the benefit of Earl Mountbatten Hospice. I agree that I will endeavour to raise as much money as possible for Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice nor its sponsors or suppliers will be liable for any loss, damage, illness or injury whatsoever directly or indirectly occasioned by or resulting from negligence, wrongful act or default of Earl Mountbatten Hospice, it's sponsors or their respective agents or from any other causes, including any act of God or the physical condition of the competitor. The applicant also warrants that he or she is fit to take part in Walk the Wight and will be fit on the day of the event it grant my permission to Earl Mountbatten Hospice to use photographs, motion pictures, recordings, data and any other record of my participation in Walk the Wight for any legitimate purpose	rejephone.	Estadi:
Land Mountbatten Hospice. I agree that I will endeavour to raise as much money as possible for Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice in or its sponsors or suppliers will be liable for any loss, damage, illness or injury whatsoever directly or indirectly occasioned by or resulting from negligence, wrongful act or default of Earl Mountbatten Hospice, it's sponsors or their respective agents or from any other causes, including any act of God or the physical condition of the competitor. The applicant also warrants that he or she is fit to take part in Walk the Wight and will be fit on the day of the event. I grant my permission to Earl Mountaten Hospice to use photographs, motion pictures, recordings, data and any other record of my participation in Walk the Wight for any legitimate purpose	: N	
Land Mountbatten Hospice. I agree that I will endeavour to raise as much money as possible for Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice. I will pay all sponsorship money to Earl Mountbatten Hospice in or its sponsors or suppliers will be liable for any loss, damage, illness or injury whatsoever directly or indirectly occasioned by or resulting from negligence, wrongful act or default of Earl Mountbatten Hospice, it's sponsors or their respective agents or from any other causes, including any act of God or the physical condition of the competitor. The applicant also warrants that he or she is fit to take part in Walk the Wight and will be fit on the day of the event. I grant my permission to Earl Mountaten Hospice to use photographs, motion pictures, recordings, data and any other record of my participation in Walk the Wight for any legitimate purpose		
Please turn over for more information		

Sponsored by



















Isle of Wight County Press

Îsleolwighb