



21st November 2019

Dear Parents/Carers

Santa's on the Harbour, Fun Run, Folkestone

We would like to invite you to be part of our team for the Pilgrim's Hospice 'Santa's on the Harbour' fun run.

The 3km run (or jog or walk!) will take place on **Sunday 8th December** starting at **11.00 a.m.** from The Harbour Arm, Folkestone. The start/finish point and route has changed this year; a map of the route is overleaf. Each entry includes a free Santa suit and a finisher's medal. The entry fees are as follows:

- Under 18s £10.00
- Adults £16.00
- Family (2 adults and 2 children) £40.00

If you or your child would like to be part of the Sandgate Team please complete the slip below along with payment to the school office by **Friday 29th November 2019.**

Please note children participants will also need to have a completed an 'Under 18 Consent Form' also returned to the school office with slip below and payment.

We will send further details of the meeting point to participants nearer the time. Of course, your support at the event would be very welcome!

Yours sincerely

Ms Nannette van der Wal
P.E. Co-ordinator

Santa's on the Harbour – Sunday 8th December 2019

Under 18 £10.00

Name Class..... (please also complete consent form)

Adult £16.00

Name.....

Family Options Overleaf



Santa's on the Harbour – Sunday 8th December 2019

Family Entry (2 Adults and 2 Children) £40.00

Child's Name Class.....

Child's Name Class.....

Adult's Name.....

Adult's Name.....

UNDER 18 CONSENT FORM

SANTAS ON THE HARBOUR!

SUNDAY 08 DECEMBER 2019

Name of child _____ Date of birth _____

Does your child suffer from any medical conditions/allergies? Yes No

If yes, please provide details of medical condition, medicine and allergies

If yes, does your child have the necessary medication on their person? Yes No

Name of parent/guardian _____ Relationship _____

Address

Mobile _____ E-mail _____

I consent for the child named to participate in the Pilgrims event listed and fully understand the conditions of the event:

- Only participants aged 0 and over can take part in SANTAS ON THE HARBOUR!
- Participants under the age of 18 must have a Pilgrims Hospices parental consent form signed by a parent/guardian
- Parent/guardian is aware of the demands of this event and that they alone make the decision about the ability of their child to complete the event
- Parent/guardian is aware that while Pilgrims Hospices extends an invite to runners aged 0 to 18 and all abilities, no special provision for children is provided at this event
- Arrangements to get to and from this event are the responsibility of the parent/guardian
- I confirm to the best of my knowledge that said child doesn't have any medical conditions/allergies or has the necessary medication for their medical condition/allergies
- Pilgrims Hospices, its staff, volunteers, agents and other participants may take photographs during the course of the event, mostly for internal use but some may be for local or national publicity purposes. It may be difficult to ensure that photographs in which your child appears will not be used in any way. If you have concerns about this please speak to the leader/organiser of the event.

Please turn over to include up to 4 more children on this parental consent form:

Signed _____ Date _____
(parent/guardian over 18)

Name of child 1 _____ Date of birth _____

Does your child suffer from any medical conditions/allergies? Yes No

If yes, please provide details of medical condition, medicine and allergies

If yes, does your child have the necessary medication on their person? Yes No

Name of child 2 _____ Date of birth _____

Does your child suffer from any medical conditions/allergies? Yes No

If yes, please provide details of medical condition, medicine and allergies

If yes, does your child have the necessary medication on their person? Yes No

Name of child 3 _____ Date of birth _____

Does your child suffer from any medical conditions/allergies? Yes No

If yes, please provide details of medical condition, medicine and allergies

If yes, does your child have the necessary medication on their person? Yes No

Name of child 4 _____ Date of birth _____

Does your child suffer from any medical conditions/allergies? Yes No

If yes, please provide details of medical condition, medicine and allergies

If yes, does your child have the necessary medication on their person? Yes No