



# RideLondon-Essex 100 Farleigh Hospice Guaranteed Place Application Form

Please complete in as much detail as possible and return to [events@farleighhospice.org](mailto:events@farleighhospice.org) by **15 April 2022**.

Title  First name  Surname

Email

Address

Postcode  Daytime telephone  Mobile

Facebook name  Twitter handle @

Gender  M  F Name of company/employer

Please give a brief description of your previous cycling/fitness experience:

**We ask all of our charity place cyclists to pay a £40 registration fee and commit to raising £450 to help provide doctors, nurses, counsellors and therapists for the 1,400 people we care for at any one time.**

If you feel you are unable to raise this amount please indicate by ticking this box:

What is your fundraising target? £

How do you plan to raise this?

Have you got a particular connection with Farleigh Hospice or the hospice cause?

How did you hear about Farleigh Hospice?

### Communications

Please note that by providing your details, you are consenting to this information being entered onto the Farleigh Hospice fundraising database. We will never pass your details to a third party for marketing purposes, however we would like to keep you up to date and let you know the difference you are making to Farleigh Hospice by sending you occasional information that we think will be of interest. Please indicate your communication preference below:

Email

Post

Please do not contact me

For office use only

Serial No: