

Payment details

Please make cheques payable to Velindre Fundraising. Registration is £200.00
The Registration fee is non-refundable once you have been registered for the event.
To pay by credit card please telephone 029 2031 6211.

Conditions of Entry:

- ▶ We require a non-refundable registration fee of £200.00
- ▶ You will need to have raised the minimum sponsorship of **£4,000 by Friday 11 March 2022.**
- ▶ Trekkers should be aged between 18 and 60 before the departure date of the event, however if you are aged over 60 you are still very welcome to take part in the trek, we will need your medical form to be signed by your GP.
- ▶ China has strict entry conditions. You must not suffer from alcohol or drug dependency. You should not have any criminal convictions.
- ▶ Your passport must have at least six months to run from date of entry.
- ▶ You must organise your own Visa.
- ▶ You must be covered by travel insurance for health, accident and loss.
- ▶ All participants take part at their own risk.
- ▶ For health and safety reasons the tour operator, ground agents, Velindre staff and/or medical staff reserve the right to stop any participant from trekking.

I apply to take part in the Great Wall of China Trek Challenge and undertake to abide by these rules and Conditions of Entry.

Signed Date



Velindre & The Ultimate Travel Company Registration Form

Please read this form carefully. We advise taking a photocopy for your own records. Every person must fill in and sign your own registration form. When we receive your £200.00 non-refundable deposit we will confirm your place in writing and send further event details. The deposit does not include personal travel insurance. All tour and travel arrangements for this event are being booked through The Ultimate Travel Company (ATOL protected No 5111).

Please complete this form and sign the registration conditions on the last page.

Send the form together with your registration fee of £200.00 to:

Velindre Fundraising, Velindre Cancer Centre,
Whitchurch Road, Whitchurch, Cardiff, CF14 2TL.

All cheques should be made payable to Velindre Fundraising.

If we cannot register you, we will return your registration fee.

Once your registration is confirmed the fee is not refundable.

Your Registration Details

IMPORTANT: We will use the information below for ticketing/security purposes. Please ensure that the name and information provided is EXACTLY the same as your passport.

Please complete Registration Form fully.



For further details please contact:

Velindre Fundraising, Velindre Cancer Centre
Whitchurch, Cardiff CF14 2TL
T: 029 2031 6211
E: info@velindrefundraising.com
W: www.velindrefundraising.com



Velindre is Wales' premier Cancer Centre, providing care, support and treatment to cancer patients and their families for over 60 years.

Velindre, the Hospital of Hope is the major provider of radiotherapy and other specialised anti-cancer treatments in Wales. Access to radiotherapy is critical to improving patient outcomes for cancer.

We all know of family, friends and loved ones who have been touched by cancer.

The incidence of cancer is rising by 2% each year in Wales with nearly 20,000 people diagnosed with this illness each year, and by 2020 one in two of us will develop cancer and 150,000 people will be living with a current or previous

diagnosis of this disease.

However, as Velindre staff strive every day to deliver the best cancer services through exceptional care, more people than ever are living with cancer – survival rates have doubled in the last 40 years through better treatments and earlier detection.

We want to lead in the delivery and development of compassionate, individualised and effective cancer care to achieve outcomes comparable with the best in the world.

Donations to Velindre are used to fund things over and above those provided by the NHS, so fundraising really does make a huge difference to patients and their families.

We aim to provide the best care, when people need us most.



Find us on:
facebook



@Velindre



Registered with
FUNDRAISING
REGULATOR

Reg Charity
No 1052501

Title (Mr/Mrs/Miss/Ms/Dr) First Name

Surname

Date of birth Place of Birth

Passport no. Place of Issue

Issue date Expiry Date

Address for all correspondence

Height (cm) Weight (kg)

Postcode

Tel (day) Tel (eve)

Mobile E-mail

If your current passport has less than six months to run from the date of your return you will need to apply for a new passport.

Next of Kin Details (not someone travelling with you)

Name
Relationship
Address
.....
Postcode
Tel (day) Tel (eve)

Please give us the name(s) of anyone you would prefer to share accommodation with.
(accommodation is single sex unless otherwise requested and usually involves two people sharing)

Do you have any special dietary requirements (e.g. vegetarian, vegan)?

Velindre Cancer Centre will provide you with a t shirt to wear on the trek, please indicate your size below: (please tick)

Small Medium Large X large

We want to ensure your fundraising is as successful as possible, so please provide information below:

What is your occupation/current employment?

What is the name of the company you work for?

Will your employer sponsor you? YES NO (please tick relevant box)

If yes, how much?

Match your fundraising total? YES NO (please tick relevant box)

Please tell us about your fundraising ideas and the amount you expect to raise:

.....
.....
.....
.....

Have you raised money for charity before?

YES

NO

(please tick relevant box)

If yes, which charity?

How much did you raise?

For which event?

How would you go about raising the minimum sponsorship target? (please indicate amounts below)

Friends, relatives and colleagues

Event, e.g. quiz, golf day, ball, race night, etc.

Fundraising dinner

Employer matched funding

Other (please provide examples)

.....

Total

Do you have a connection to Velindre Cancer Centre?

.....

How did you find out about our event? (please be as specific as possible)

.....

Thank You

I agree to donate all the proceeds from the above event to Velindre Cancer Centre Under no circumstances will I divert any money raised in this name to any other organisation or individual.

By ticking this box I understand and agree that Velindre Cancer Centre does not accept any responsibility for this event or activity. I understand and agree that I am undertaking this event or activity at my own risk and that VCC is not responsible for any risk, injury, loss or damage that may result and will not be liable for any claim which may arise.

Before your trip we would like to circulate your email address to your fellow trekkers for the purpose of enabling you to meet up and to train, fundraise and travel together. Please tick the box to indicate: -

Yes, I would like my email address to be shared with my fellow trekkers

We would love to keep you up to date with our events and news. If you would like to receive these updates, please tick the boxes to tell us how you would like to receive communication from Velindre Fundraising.

Yes please, I'd like to hear from you by Post

Yes please, I'd like to hear from you by Email

I have enclosed my non-refundable registration fee, payable to Velindre Fundraising, together with the completed medical questionnaire. I have read and agree to the registration terms and conditions including the tour operator's booking conditions.

Signed Date