**CPRE HEREFORDSHIRE**

**SAVE OUR RIVERS WALK**

We ask walkers to please complete all fields, note the fields marked “required” must be completed for the form to submit correctly. **Please return to** [**volunteer@cpreherefordshire.org.uk**](mailto:volunteer@cpreherefordshire.org.uk)

First Name (required):

Surname (required):

Address Line 1 (required):

Address Line 2 (optional):

Town/city (required):

Postcode (required):

Mobile (required):

Your email Address (required):

In case of emergency, contact details of someone not walking on the day:

Name (required):

Telephone (required):

I am over 16 (required): Yes or No

Note: Participants 16 and under must be accompanied by an adult participant. Participants 17 or 18 years old can walk unaccompanied but must have the permission of their guardian.

Signed: -

**Please return this form to** [**volunteer@cpreherefordshire.org.uk**](mailto:volunteer@cpreherefordshire.org.uk)