

Mr Sparkle's Dark 'Un

Night-time fell race

5 miles, 720' climb Category: BS

7.30pm Friday 24th February 2012

ROYAL HOTEL, TOCKHOLES, DARWEN. BB3 0PA

A brand new fell race. At night. With headtorches! Come and try this exciting event. Free chip butty!

You can expect a couple of stiff climbs, open moorland, mud and a dash down to the finish. Full body cover must be carried and a headtorch must be used. There will be a kit check. The course will be marshalled & marked but you should be a competent navigator. Minimum age 18. Donation to Bolton MRT. Trophy for the winner and age group prizes.

Course record guaranteed to be set! Will it be you?

Only £5.00 pre-entry* Limited to 60 places so get your entry in quick!

Cheques payable to Darwen Dashers.

Mr Sparkle
39 Cyprus St,
Darwen,
Lancashire
BB3 2JX

(*£5.50 on the night if places left)

More info from www.dashers.org.uk email the.dash@hotmail.co.uk

RACE NUMBER _____
RACE NAME _ _Mr Sparkle's Dark 'Un_____ RACE DATE _24th February 2012
FULL NAME _____
ADDRESS _____
_____ Postcode _____
PHONE NUMBER _____ VEHICLE REGISTRATION _____
EMAIL _____
CLUB _____
DATE OF BIRTH _ _____
CATEGORY (Circle below as appropriate):-
MALE MU23 MV40 MV45 MV50 MV55 MV60 MV65 MV70
FEMALE LU23 LV40 LV45 LV50 LV55 LV60 LV65
EMERGENCY CONTACT:

NAME_ _____ PHONE NUMBER _____

I UNDERSTAND THAT THIS RACE IS HELD IN ACCORDANCE WITH BOTH THE RULES AND SAFETY REQUIREMENTS OF THE FRA. I CONFIRM THAT I AM AWARE OF THE ORGANISER'S INFORMATION AND REQUIREMENTS IN CONNECTION WITH THIS RACE. I ACCEPT THE HAZARDS INVOLVED IN FELL RUNNING AND ACKNOWLEDGE THAT I AM ENTERING AND RUNNING THIS RACE AT MY OWN RISK. OTHER THAN THE ORGANISER'S LIABILITY FOR CAUSING DEATH OR PERSONAL INJURY BY NEGLIGENCE, I CONFIRM THAT I UNDERSTAND THAT THE ORGANISER ACCEPTS NO LIABILITY TO ME FOR ANY LOSS OR DAMAGE OF ANY NATURE TO MYSELF OR MY PROPERTY ARISING OUT OF MY PARTICIPATION IN THIS RACE. ANY LLAMAS PRESENT WILL BE AT THE DISCRETION OF THE ORGANISERS AND MAY BE TURNED AWAY WITHOUT NOTICE.

SIGNED _ _____ DATE _____

PHONE NUMBER _____