**BALCOMBE BULL RUN 2020**

***Sunday 15th March***

**When:** Sunday 15th March, 2020. Race starts at 10.30am

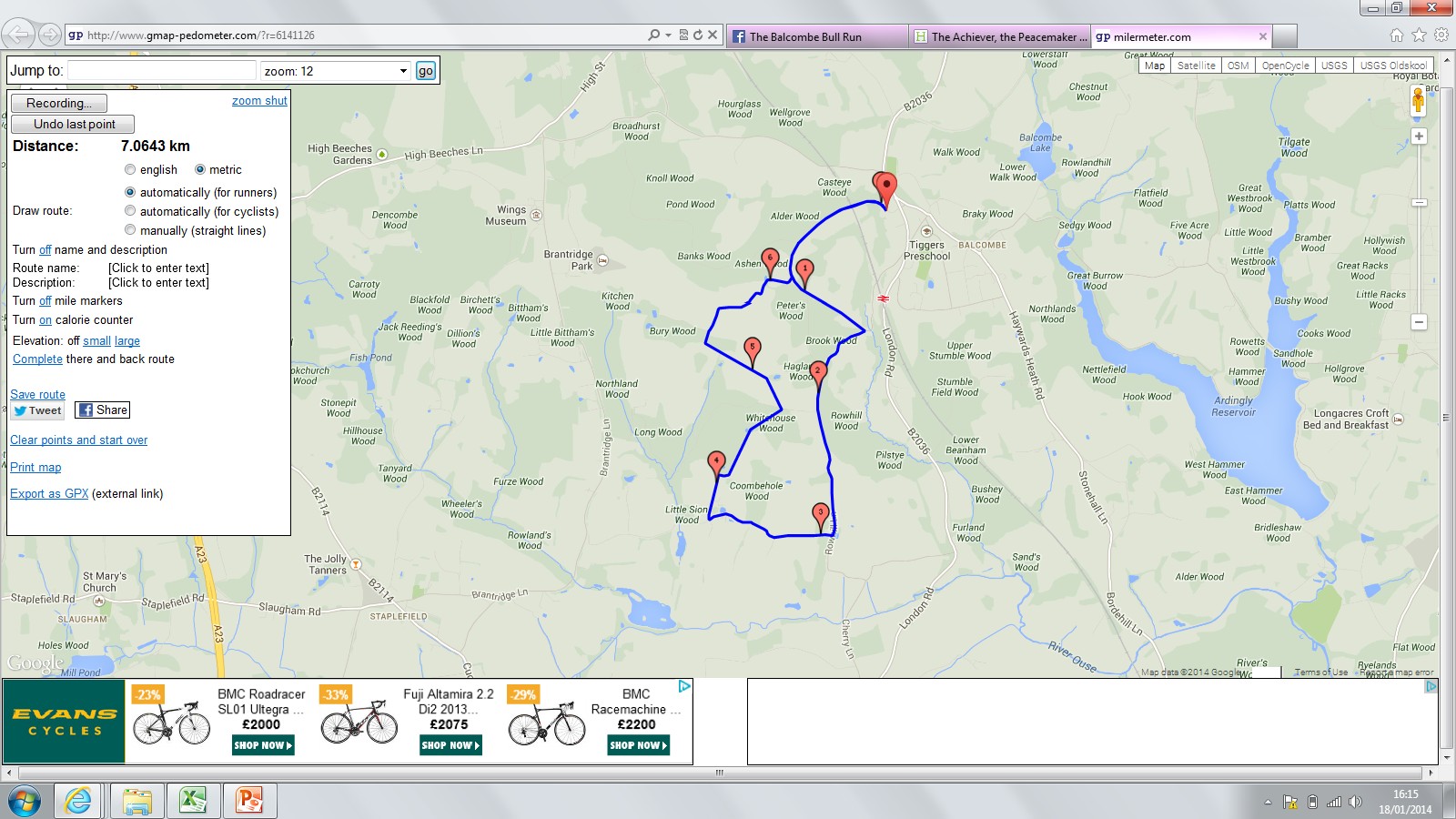
**Where:**  Balcombe Primary School, Balcombe, West Sussex RH17 6HS – see map below

**Distance:** 7.1km on footpaths, fields, lanes and tracks……hilly course and it could be muddy and wet

**Who for:** All runners must be age 12 or over on 31/8/20 (under 16’s with signed consent)

**How much:** £12 for adults, £5 under 18s.

**Course Route**

http://www.gmap-pedometer.com/?r=6141126

**PARKING**

**Parking**

START / FINISH

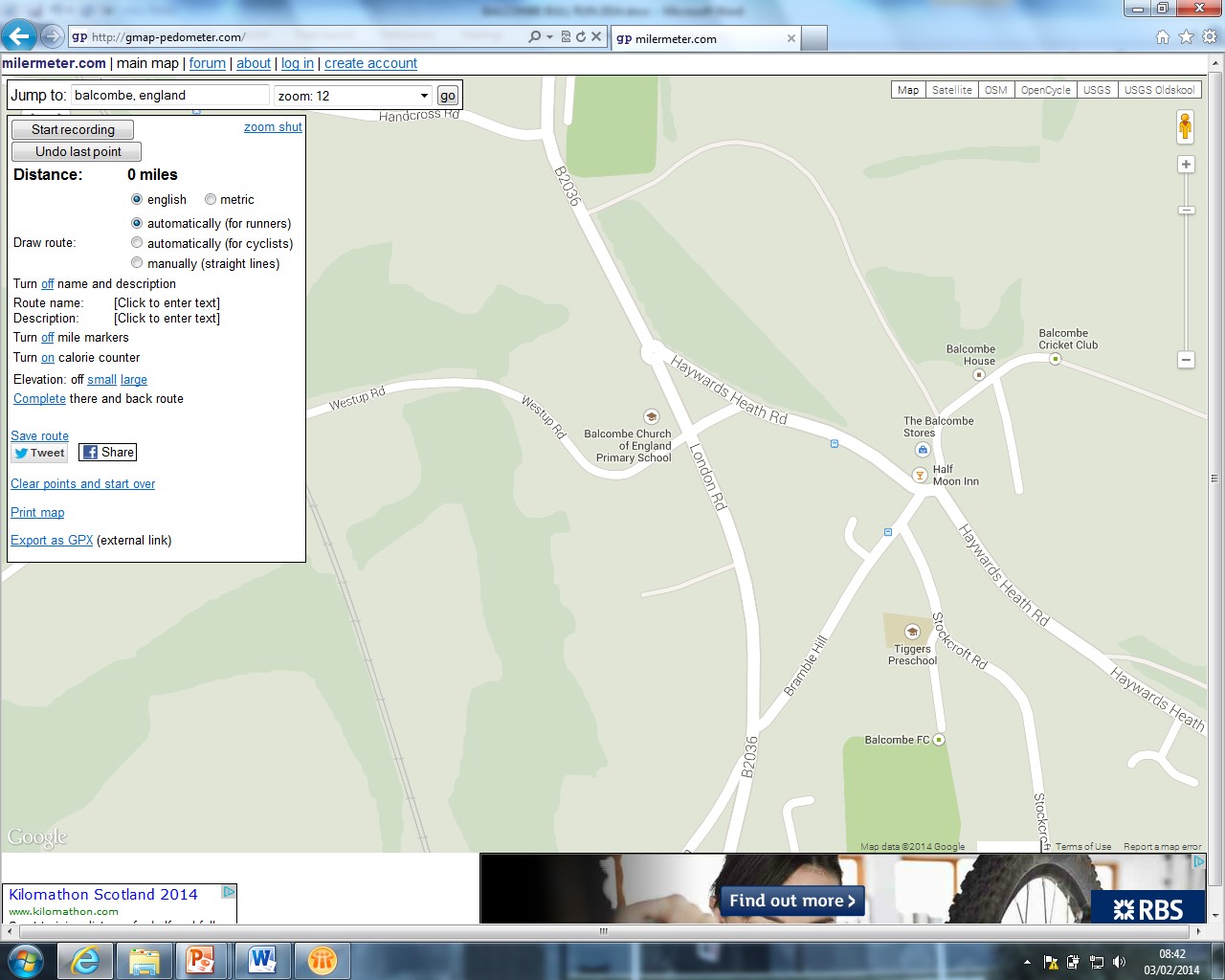
There is extensive parking in the layby off the B2036 beside St Marys Church (150m from Registration). If you park in the village centre, please be mindful of local residents.

“Postman’s” walk

Steep hill

**Registration**

This is in the main hall of Balcombe School (see below) and is where you will collect your race number. Registration closes at 10.15am



**START / FINISH**

**REGISTRATION**

**Refreshments**

These will be available from 9.30am – tea, coffee, cake, bacon sandwiches, etc – and after the race until 12.15pm. Supporters are welcome in the school hall.

**Application Form (one per runner…..PLEASE WRITE LEGIBLY)**

Runner Name: ………………………………………………………… Runner’s Address:…………………….………………………………....

Adult □ £12 Under 18 □ £5 ………………………………………………………………………………………

Male □ Female □ Postcode:………………………………………………………………………

Emergency Telephone:…………..…………….…………………. Email:……………………………………………………………………………..

**ONLINE ENTRY & PAYMENT IS AVAILABLE AT www.balcombeschool.co.uk**

**You can also TRANSFER the entry fee directly to Balcombe School PTA’s bank account**

CAF Bank Ltd, Sort 40 52 40, account 00060230, Balcombe School PTA

**Cheques payable to Balcombe School PTA**

**Entry fees paid? PayPal (through website) ⃝ Direct bank transfer ⃝ Cheque (enclosed) ⃝**

**Declaration**

I declare that I am medically fit and capable of completely the event safely. I enter the race at my own risk. I will not hold the event organisers or any officials responsible for any accident, injury, loss or damage resulting from my participation in the race.

Signed:…………………………………………………………………………………………………………………………Date:…………………………………

**Consent for under 16 year olds**

I consent that the above named person is aged 12 or over of 31/8/20 and is medically fit and capable of completely the event safely. I confirm that they enter the race at their own risk and will not hold the event organisers or any officials responsible for any accident, injury, loss or damage resulting from their participation in the race.

Signed:…………………………………………………………………………………………………………………………Date:…………………………………

Name:…………………………………………………………………………Parent / Guardian

**Race numbers will be given out on the day. Please register before 10.15am**

**SEND COMPLETED APPLICATION FORMS & ENTRY FEES TO:**

**Mat Record,**

**Afton House, Deanland Rd,**

**Balcombe, West Sussex RH17 6LX**

**More information available at** [**www.facebook.com/BalcombeBullRun**](http://www.facebook.com/BalcombeBullRun) **or phone 07795 451 156**