

Sponsored Walk



4Sight
vision support



Sign up
today!

Saturday 10th June 2023
Angmering Park Estate

This summer, choose your challenge:
3 miles / 6 miles / 13.1 miles (half marathon)

Raising funds to support blind and sight impaired people
living in West Sussex to live life without limits.



01243 838 001

fundraising@4sight.org.uk



Registered with
**FUNDRAISING
REGULATOR**

Charity Number: 1075447
Company Number: 03740647

Join us for our 2023 Sponsored Walk

NEW for this year – choose your distance:
3 miles, 6 miles or 13.1 miles (a half marathon)!
Choose the challenge that's right for you and
enjoy a day raising funds to support blind and
sight impaired people across West Sussex.



Angmering Park Estate is home to beautiful,
undulating (and sometimes hilly!) country footpaths. The 3 mile route is
suitable for wheelchairs and pushchairs, dogs on leads welcome.
Entry costs **£10 for adults** and **£5 for children** aged 3+.



Entry includes: on-route refreshments, bespoke
wooden finisher's medal and family activity trail.
Special **event T-shirt also available for £10** –
order via the registration form by **26th May**.

The entrance fee covers our costs for putting on the
event, we would love it if, in addition, participants
were able to pledge to raise sponsorship to support
the vital work of 4Sight Vision Support.

£50

could enable
us to send our
informative
newsletters, available in
large print, audio
or Braille, to **50**
people.

£100

could enable us to
carry out **3** Low Vision
Assessments, supporting
clients to find aids and
techniques to make
completing daily tasks
easier.

£250

could enable us to
support **5** clients for
a whole year with our
range of tailored
support and services.

Whether it's £50 or £500 you raise as part of your challenge, every pound
helps us to support blind and sight impaired people to live life without
limits.

For more information or to register and pay by card, call the Fundraising
Team on **01243 838 001**, or visit **www.4sight.org.uk/sponsored-walks-23**

2023 Sponsored Walk – Registration Form

Your Details

Each participant must complete a form, please contact us for further copies.

Title: _____ **First Name:** _____ **Surname:** _____

Address: _____

_____ **Postcode:** _____

Telephone: _____

Email address: _____

We would love to know why you are taking part and supporting us at this event, let us know your story below:

We may be able to assist with transport to and from the event, would you like more information about this? Yes No

We have a team of trained sighted guides to support people living with sight loss during the walk. Do you require a sighted guide? Yes No

Keeping In Touch

By registering for this event the details you provide will be stored on our database. They will only be used to process and contact you in relation to this event. In the future we would like to let you know about the vital work we do for people living with sight loss and opportunities to support us. We will never sell or share your data and we promise to keep your data safe and secure.

Please tick the boxes below to tell us all the things you would like to hear about and how you would prefer to hear from us:

Newsletter

Post

Volunteering

Email

Future Events

Telephone

Campaigns & Appeals

Leaving a gift in my Will

Fit to walk

You will need to be in reasonable health to take part in our walk. Please confirm you are fit to walk by signing at the bottom. Anyone walking must complete this form to be able to take part in the event.

Health information: it is important that 4Sight Vision Support is aware of any health problems that you have that may require medical attention during the walk.

Do you suffer from any such health problems? Yes No

If yes, please outline the health condition here:

Please provide details for an emergency contact who will be available on the day of the event.

Contact name: _____ **Relationship:** _____

Contact number: _____

I understand that the walk is not a race and that the walk has its own hazards. I am aware that 4Sight Vision Support and its employees and volunteers cannot be held responsible for any personal injury, accident, loss, damage or public liability.

I confirm that I am in reasonable health and fitness and that I understand the information detailed above.

Signed: _____ **Date:** _____

Guardian over 18 must sign for a child.

| | |
|---|----------|
| Please tick which distance you would like to sign up for. | |
| Entry is £10 for adults and £5 for children. | |
| <input type="checkbox"/> 3 miles <input type="checkbox"/> 6 miles <input type="checkbox"/> 13.1 miles | £ |
| <input type="checkbox"/> T-Shirt <input type="checkbox"/> XS <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL | £ |
| <input type="checkbox"/> Optional donation | £ |
| Total: | £ |

Please return this form, along with any cheques to:
Fundraising Team, 4Sight Vision Support,
36 Victoria Drive, Bognor Regis, West Sussex, PO21 2TE

Internal use only: Received by: Date: CL No. :
Processed on CL by: Date: Sent reg letter by: Date:
Event confirmation by: Date: Payment details: