



Walker registration form

Spelthorne Walking for Health Scheme

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|------------|--|
| Name: | |
| Address: | |
| Post code: | |
| Phone: | |
| Email: | |

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Please tick to confirm you understand you take part at your own risk and will seek medical advice before starting our walks if appropriate.

How we use your data

When you register to join our scheme, we will use your personal information for administrative purposes only to support your participation.

For more information about how we use your data please visit www.spelthorne.gov.uk/privacy