

Health Walk Register

WALKERS WALK AT THEIR OWN RISK

**New Walkers must complete a Walker Registration Form and give to a walk leader

Date: Time: 10.15	Name of scheme: FRIDAY TROTTERS SHORT / MEDIUM / LONG (Delete as Appropriate)
Weather:	Location of walk:
Leader:	Walk duration (average):

Please **PRINT** details below (EVERY NAME NEEDS TO BE READ)

"Please indicate if leader

	Lea-der*	First Name	Surname	**Tick if New Walker		Lea-der*	First Name	Surname	**Tick if New Walker
1					26				
2					27				
3					28				
4					29				
5					30				
6					31				
7					32				
8					33				
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25					50				