Golf Marathon4Martha Registration form

We are encouraging all our teams to take on the Golf Marathon4Martha challenge on a date that suits them in the months of July, August or September.

Team captain's details (you will be the main contact for the challenge)

Title Mr Mrs Miss Ms	Other (please specify)
Forename	Surname
Job title (if applicable)	
Address	
	Postcode
Please feel free to contact me by:	
Telephone	Mobile
Email	
Are the contact details you supplied your	personal home details? organisation details?
to receiving information from Martha Trust, please phone email letter or email	fundraising@marthatrust.org.uk parties, but in order to carry out our work we may need to pass your
Other team members: 1	
2	
We would like to take part in the Golf Marathon	4Martha, we are going to take on:
Marathon – 4 rounds, 72 holes	
Half marathon – 2 rounds, 36 holes	
If you know the golf course/s, you will complete y	our challenge at please provide details:
If you know the date you plan to complete you ch	allando on plaza latus know:
Set your teams fundraising target: £200	£400 Other
Signed	Date
Print name	
MARTHA	Registered with
	(FR) FUNDRAISING REGULATOR
So the second	Martha Trust, Homemead Lane, Hacklinge, Deal, Kent CT14 0PG
T 01304 6104	48 F 01304 615462 E fundraising@marthatrust.org.uk W www.marthatrust.org.uk