

Registration Form

Vietnam to Cambodia Bike Ride 2019

18-29 September 2019



Please complete all three parts of this form and check when complete:

- Complete personal details
- Complete and sign the medical questionnaire
- Read and sign Terms and Conditions

Please return your completed form with your £250 registration fee to events@careinternational.org or Events Team, CARE International UK, 89 Albert Embankment, London, SE1 7TP.

Personal Details

Full name as it appears on your passport	
Preferred name e.g. Rob, Gill	
Home telephone number	
Mobile number	
Email address	
Home address (including postcode)	
Company	
Job title	
Date of birth (DD/MM/YY)	
Gender	
Cycling shirt size	S/M/L/XL
Passport number	
Passport date of issue (DD/MM/YY)	
Passport date of expiry (DD/MM/YY)	
Passport place of issue	
Passport place of birth	
Passport nationality	
Emergency contact/Next of kin name	
Emergency contact/Next of kin relationship to you	
Emergency contact/Next of kin home telephone number	
Emergency contact/Next of kin mobile number	
Emergency contact/Next of kin email address	

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Emergency contact/Next of kin address (including postcode)	
Do you have any dietary requirements/food allergies?	
Accommodation is shared, single sex, usually twin rooms. If you wish to share with someone specific, please tell us their name.	
Would you like to pay a single room supplement of \$250? This will ensure you have your own room throughout the trip.	Yes/No
To extend your trip before or after the ride, there is a £50 administration fee, plus any increased costs for a different flight. CARE is unable to make any local arrangements for you, however we can put you in touch with our local guides who can discuss tour options if you require. Are you interested in extending your trip?	Yes/No
Please tell us how you heard about the ride	

Privacy & Data Protection: We will always respect your privacy; if you prefer not to be contacted by certain methods please let us know. We will always protect your data; we will not sell your personal details or swap them with any other organisation.

Medical questionnaire

It is for your own safety that we find out as much as possible about your medical history, to ensure that you can cope with the rigours of your chosen challenge. Your answers will be treated in the strictest confidence and will not necessarily adversely affect your chance to take part. Any decisions will be made in consultation with you.

The information you supply will only be disclosed to an appointed Doctor who will be supporting the challenge under the instruction of CARE. It is one of the conditions of your registration that you give full and accurate details.

Height	
Weight	

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NB: If your BMI is over 25 it does not mean that you cannot take part in this challenge, but our doctor may contact you to discuss training and possible difficulties you will face on the challenge.

Tick the relevant box if you suffer, or if you have ever suffered from:

<input type="checkbox"/>	Heart trouble and/or blood pressure problems
<input type="checkbox"/>	Asthma, bronchitis and/or shortness of breath
<input type="checkbox"/>	Diabetes
<input type="checkbox"/>	Epilepsy and/or fainting attacks
<input type="checkbox"/>	Migraine
<input type="checkbox"/>	Severe head injury
<input type="checkbox"/>	Cancer
<input type="checkbox"/>	Back problems
<input type="checkbox"/>	Allergies
<input type="checkbox"/>	Fractures, tendon, ligament/cartilage damage
<input type="checkbox"/>	Physical or other disability
<input type="checkbox"/>	Psychiatric or mental illness
<input type="checkbox"/>	If you have been hospitalised within the last 2 years
<input type="checkbox"/>	If you are suffering from or a carrier of any infectious diseases
<input type="checkbox"/>	Any other serious illness

Please give more details of your medical conditions if you have ticked any of the above boxes:

Do you regularly and/or currently use any form of medication? If so please give details:

Medical Declaration

Whilst on the trip, I hereby give my permission for a Doctor appointed by CARE to administer medical treatment to me, make any medical decisions on my behalf in the event of my incapacity and, if necessary, to inform my emergency contact as listed on my registration form.

I confirm I will take sufficient supplies of medication to meet any current medical conditions and I will declare these to the Doctor on the trip. If this medication is an emergency treatment, e.g. an asthma inhaler or Epipen, I will ensure I carry it with me at all times whilst on the trip. I agree to take proper precautions against sunburn [and malaria] for the duration of the trip.

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I confirm that, to the best of my knowledge and belief, my physical and mental health are good and I have provided a true account of my current condition and medical history. I understand that by giving false information I could be compromising the safety of myself and the rest of the group.

I agree that if necessary, CARE or any Doctor employed on its behalf may contact my GP to verify or discuss any details I have included on this form. This will not be done without informing me first. I agree to bear the cost of my GP providing any medical declaration or opinion required by CARE to enable me to participate.

I understand that CARE is not liable for any expenses or losses incurred by me resulting from illness or personal injury whilst on the trip, unless death or personal injury arises as a result of CARE's negligence.

I agree to book personal travel insurance on or before the First Fundraising Deadline and provide CARE with a copy of my insurance policy, which meets or exceeds the requirements in Condition 5 below. I understand that failure to disclose a pre-existing medical condition could invalidate my travel insurance and that I am responsible for declaring any pre-existing medical conditions directly to the insurance company prior to departure.

Signed _____ Date _____

Please read and sign the following Terms and Conditions

1. I will be not less than 18 years of age on the departure date of the challenge and not more than 70 years of age on the return date.
2. I confirm my passport will be valid for at least 6 months upon my return date to the UK and I understand it is my responsibility to have the correct visas and documentation necessary for travel (advice on what the destination countries require is in the information pack).
3. I agree to pay a £250 non-refundable deposit and raise a minimum of £3,300 for CARE International UK ("**CARE**"). 80% of this (£2640) will be sent to CARE together with a copy of my travel insurance policy on or before **18 June 2019** (the "**First Fundraising Deadline**") in order to secure my place. If the money and proof of insurance is not received by CARE on or before this date, my place on the trip will not be booked or guaranteed and may be forfeited.
4. If I cannot raise the required amount by the First Fundraising Deadline, my place will be forfeited, unless I pay a personal advance in lieu of my fundraising. If the balance of the required sponsorship is raised and sent to CARE within 4 weeks of returning to the UK, the personal advance can be refunded back to me. A refund will only be issued if a personal advance form is completed at the time of making the payment, acknowledging that this sum is a personal advance and not general fundraising or a personal donation.
5. I undertake to purchase personal travel insurance that covers me for the duration of the challenge and includes:
 - repatriation in the event of death or serious injury or illness;
 - helicopter recovery to a suitable hospital in case of emergency;
 - personal liability cover to a minimum value of £2,000,000;and is suitable for a trip which has cycling as its primary purpose. Notwithstanding that CARE must receive a copy of my insurance policy, I understand that CARE gives no opinion as to the suitability or otherwise of any insurance policy, and that it is solely my responsibility to obtain adequate cover with inclusions as noted above.
6. I understand that the provisional trip dates are 18-29 September 2019, however these dates are subject to change when the flights are booked. Changes are not anticipated, and if they are made

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they are unlikely to change within more than 2 days of departure. Any changes will not affect the length of the trip. I understand that flights may be overnight flights and will bear this in mind when planning connections.

7. Flights will be booked using an ATOL protected travel agent. Terms and conditions of the flight will be set by the airline. Once booked, the flights are subject to change by the airline and I understand this is out of the control of CARE. I accept all responsibility for disruption to onward travel or employment plans caused by changes to the itinerary, howsoever arising, and will ensure that my travel insurance policy adequately covers my needs.

8. I understand that the trip price:

Includes

- Return flights from London including flight taxes
- Accommodation, based on sharing a room
- Professional local bike guides, UK leader and UK doctor
- Meals including breakfast, lunch and dinner
- Mountain bike hire
- Support bus for any transfers & truck for the bikes
- Snacks, water, fruits and cold drinks en route
- All entrance fees inc. day pass to Angkor Wat

Excludes

- Departure taxes
- Cambodian Visa (currently \$35 for British citizens). A Vietnam visa is not currently required for visitors staying less than 30 days.
- Alcoholic and other beverages during meals
- Tips for guides or local staff
- Travel insurance
- The cost of any advised or elective inoculations
- Travel to and from the relevant London airport

9. I agree to the following cancellation policy:

- If I am unable to take part, my sponsors will be able to request a refund of their donation. Upon proof of receipt of the donation the charity will issue a refund. I understand I am not able to request a refund on behalf of my sponsors.
- If I am unable to take part for medical or personal reasons, I will claim the cost of the trip back on my travel insurance. If I have paid for the cost of the trip personally I will keep the claimed amount, however if the costs have been paid from my fundraising, CARE will receive the amount claimed from the travel insurance company. I understand that if I am unable to take part in the trip, I will ensure CARE will not incur any costs as a result of my cancellation.
- If I have funded the trip myself, I will declare this to CARE in writing at the point of donation (failure to do so will result in the donation being considered as general fundraising). If I cancel before the First Fundraising Deadline I understand I will be able to request a refund of any personal contribution, excluding the £250 non-refundable registration fee. After the First Fundraising Deadline, I will only be able to claim back from CARE any donation over and above the costs of the trip. The costs of the trip will be claimed from my insurance company as detailed above.

10. If I would like to extend my trip, I agree to pay any additional costs of a new flight and all costs incurred during my extended stay. There will be an administration fee of £50 in addition to any additional flight costs. I will pay this to CARE International UK before they book the agreed flights.

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11. I understand that the countries we visit and will transit through have strict entry conditions. I confirm that I do not suffer from alcohol or drug dependency and that I will not take banned substances at any time during the trip.
12. I do not have any criminal convictions.
13. I will take part in the challenge and any optional or ad hoc activities offered during the trip at my own risk.
14. I understand that parts of the challenge may be filmed and photographs may be taken. I agree to the publication of such photographs or film and their use by CARE and those authorised by CARE in any way which they may see fit, now or in the future, including but not limited to film, broadcast, radio, TV, internet, publications and publicity.
15. I understand that for health and safety reasons, the tour operator, ground agents and/or medical staff reserve the right to stop any participant from cycling. CARE further reserves the right to cancel, curtail or change the challenge in exceptional circumstances, including, without limitation, in the event of political unrest, terrorism, war, strikes, illness, epidemic, natural disaster or extreme weather or in the event that the Foreign and Commonwealth Office advises against travel to the region. I understand that any such decision made by CARE, its agents or employees in those circumstances shall be final and that CARE will not be liable for any costs, losses or inconvenience caused by events beyond its control. In the event of cancellation where costs can be recovered from my insurance company, I agree to claim back and recover all costs and return the claimed money to CARE to be used towards an alternative trip
16. If I am unable to take part in the trip due to ill health or personal circumstances, I confirm I will claim the costs incurred by CARE from my insurance company and return them to CARE. I understand that any funds recovered from my insurance company, plus the remainder of my fundraising/donation can be used towards a different fundraising event for CARE, however my registration fee and any costs not recovered will not be transferred.
17. I confirm that I am up to date with routinely recommended vaccinations according to the UK schedule and have had a tetanus booster within the last 10 years. I confirm that I will consult a tropical medical specialist and have the recommended vaccines and anti-malarials before departure and will keep a vaccination certificate with my passport at all times.
18. I have fully disclosed my medical history above and undertake to inform CARE of any changes to my physical or mental health between now and the departure date.
19. I understand that breach of these terms and conditions, including, without limitation, conditions 11, 12, 13, 17 and 18 may invalidate my insurance policy.
20. I understand that CARE will not be liable for any personal injury, costs, legal fees, disruption to travel plans or my inability to participate, howsoever caused, including, without limitation, by a breach of these terms and conditions or by my failure to follow the reasonable instructions of the CARE staff or guides. I understand that CARE will have no responsibilities towards me in the event of any such breach or failure and that the group may need to continue without me under these circumstances, in which case I shall be responsible for arranging my own return to the UK. Nothing in the foregoing shall limit CARE's liability in the event of death or personal injury arising from CARE's negligence or any other liability that cannot be excluded by law.

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21. This agreement shall be governed by and construed in accordance with the laws of England. I submit to the exclusive jurisdiction of the courts of England in the event of any dispute, controversy, proceedings or claim arising from this agreement.

Signature: _____ **Print name:** _____

Date: _____

Payment

You can pay your £250 registration fee by Cheque payable to 'CARE International UK' or by completing the below credit card information. All credit card details are destroyed after processing

Card type (please delete) ~~Visa/Mastercard/Maestro~~

Name as appears on card _____ Card start date _____

Card number _____ Card expiry date _____

Card issue number (if applicable) _____

Card CVV number (last 3 digits on signature strip) _____