

VHI Women's Minimarathon ROTUNDA FUNDRAISER DETAILS



Name of Participant:

Home Address:

.....

Business Address:

.....

Tel Mobile

Email

Flora Mini Marathon Race Entry Registration No.

Size of T-Shirt (Tick Appropriate Box)

☐

Small

☐

XLarge

☐

Medium

☐

2XLarge

☐

Large

☐

3XLarge

I wish to raise money to support the Rotunda Hospital

in particular for:

Please complete and
email/post to
THE ROTUNDA FOUNDATION
at :

**THE PILLAR ROOM
ROTUNDA HOSPITAL
PARNELL ST
DUBLIN 1**

email: friends@rotunda.ie