

## £10 FOR 4 WEEKS

## **ENJOY THESE BENEFITS**

- Weekly weigh-in
- Walk of the month
- Nutritional information/tips
- Update channel

- Healthy recipes
- Monthly awards
- Fitness videos
- And more!

SIGN UP NOW! Simply fill in the form on the back of this

flyer



## WANT MORE INFO?

CONTACT JOAN GILMORE 07220 662215

CONTACT UNA GILMORE 07934 553600

## Weigh 2 Go Registration Form



Name:				
Mobile Number:				
Date of Birth				
Address:				
Do you consent for	your photograph to be taken for media purposes?	Yes	/	No
	al information you believe we should be aware of wis weight loss programme e.g. medical conditions?		/	No
NEXT OF KIN:	Name:			
NEXT OF KIN:	EMERGENCY Contact number:			-
	PLEASE SIGN			
	e the responsibility to work within my own limitatio is true and correct to the best of my knowledge and l			the
SIGNATURE	Date //2020			
occur while I am tr on the premises of t participating in thi with other participal Joseph's GAA Club,	omplete responsibility for any injury or accident, whavelling to or from Weigh2Go, during the event or use the event. I also am aware of all risks associated with sevent, including but not limited to falls or accident ants. I agree that no liability whatsoever shall be attook Ballycran or any member of St Joseph's GAA Club, jury, loss or damage suffered by me in or by reason caused.	vhile h al cor tache Bally	I a nta ed t ycr	im ict o St
The GAA Injury Be	nefit Fund does not cover participants in Weigh2Go	).		
SIGNATURE	Date / /2020			