

OXFAM TOWERRUN 2020 APPLICATION FORM (RELAY) * Required field

* Team Name:				
*	icipants must be aged 18 or on the event date.	* Fill in the names in the relay order		
* Teammate A:		* Teammate C:		
* Teammate B:		* Teammate D:		
Team contact person Information (please select where appropriate)				
Company/Organization (if any) :		* Mr. / Ms. ; Name:		
* Tel.:		* Email:		
* Address:				
(Please keep blank if the information is the same as above) I'd like a donation receipt		Name of Receipt:		
Milling address:				
Enrolment Fee & Donation				
Category	Minimum Donation Amount	Extra Donation	* Total	
1 st Team	\$ 5,000.00	\$	\$	
2 nd Team	\$ 3,000.00	\$	\$	
Please send email to Oxfam (towerrun@oxfam.org.hk) if you are looking for priority starting order.				
Will you join the 'Oxfam Virtual Run'?				
No Yes; more information:				

Teammate A Information (please select where appropriate)			
* Mr. / Ms. ; Name:	* Name on medal: (Up to 15 characters for English letters and 7 characters for Chinese)		
* Date of Birth:	* ID / Passport No.:		
* Tel.:	* Email:		
* Address:			
* Emergency Contact Person:	* Tel.:		
Have you participated in previous Oxfam TowerRun? Yes; Year: No			

澳門樂施會:澳門宋玉生廣場 258 號建興龍廣場 18 樓 F 室 | Oxfam in Macau: Alameda Dr. Carlos d'Assumpcao, No. 258, Praca Kin Heng Long, 18 Andar F Tel: (853) 2875 7560 | Fax: (853) 2875 7667 | Email: <u>Towerrun@oxfam.org.hk</u> |Website: <u>https://www.oxfam.org.hk/tc/join-our-events/oxfam-towerrun</u>



Teammate B Information (please select where appropriate)				
* Mr. / Ms. ; Name:	* Name on medal:			
* Date of Birth:	(Up to 15 characters for English letters and 7 characters for * ID / Passport No.:			
* Tel.:	* Email:			
* Address:				
* Emergency Contact Person:	* Tel.:			
Have you participated in previous Oxfam TowerRun? Yes; Year: No				
Teammate C Information (please select where appropriate)				
* Mr. / Ms. ; Name:	* Name on medal: (Up to 15 characters for English letters and 7 characters for Chinese)			
* Date of Birth:	* ID / Passport No.:			
* Tel.:	* Email:			
* Address:				
* Emergency Contact Person:	* Tel.:			
Have you participated in previous Oxfam TowerRun? Yes; Year: No				
Teammate D Information (please select where appropriate)				
* Mr. / Ms. ; Name:	* Name on medal: (Up to 15 characters for English letters and 7 characters for Chinese)			
* Date of Birth:	* ID / Passport No.:			
* Tel.:	* Email:			
* Address:				
* Emergency Contact Person:	* Tel.:			
Have you participated in previous Oxfam Tower	rRun? Yes; Year: No			

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