



KARRINYUP MALL WALKER REGISTRATION FORM 2024

Please print very clearly and complete every section do not leave any blank lines

First Name: _____ Surname: _____

Address: _____

Suburb: _____ Postcode: _____

Phone No: _____ Mobile: _____

Email: _____

Date of Birth: _____ Age: 55-64 65-74 75-84 85+

T-Shirt size: Small Medium Large XL 1XL 2XL

EMERGENCY CONTACT DETAILS

Name: _____

Relationship: _____

Phone No: _____ Mobile: _____

PHOTO CONSENT

By signing below I give consent to be photographed or videoed by Karrinyup Shopping Centre Mgmt. I authorize that the photos may be used for professional development and promotion by the centre.

Sign here: _____

Once your form is complete please bring this with you to one of the walk days (Tuesday or Friday) at 8am to meet the Mall Walking Supervisor who will complete your registration and provide T-shirt and lanyard. Best parking for this is Orange car park under Big W access from Karrinyup Road. The Mall Walkers meet at this entrance for doors to open at 8am.

We look forward to welcoming you to the group!