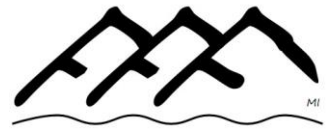


Dungarvan Hillwalking Club

Dungarvan Hillwalking Club 1995



◆ Comeragh CHALLENGE Registration Form

This self-navigated walk is approximately 45km long on mountain terrain with 2,000m ascent. It is aimed at the very experienced and fit walker with navigation skills. The route takes walkers via Lachtnafrankee and Knockanaffrin Ridge to the Nire Valley. From there the route takes in The Nire Gap, Carrignagour, Boola Cairn, Coumfea, Seefin, Farbreaga and Cruachan before finishing back at Bridgie Terries.

Rules and Conditions of entry

Participants in the Challenge walk must be over 18 years of age. (Proof of age may be requested).

For all sections of this event participants must have suitable waterproof clothing, suitable hiking boots, an OS map of the area (DS No. 75) and a compass (and be proficient in their use).

Carry their control card during the walk.

Reach the checkpoints before the stated closing times and finish no later than 20:00 hrs.

As the walk may take up to 12 hours to complete, participants should carry sufficient food and water with them, including emergency food such as glucose (drinks/sweets) and chocolate.

Organiser's decision is final: In any matter arising in connection with the walk, the decision of the organisers is final. The organisers will not hesitate to cancel the entry of anyone, who, in their opinion, is not fit to take part or continue in the walk. Every precaution is taken by the organisers to safeguard participants, but those taking part do so at their own risk.

The organisers will not be responsible for any mishap, injury, loss or damage regardless of the cause.

In the event of an accident, ALL participants and stewards come under the control of the rescue co-ordinator.

Please PRINT your details and Sign below

Name:	<input type="text"/>	
Address:	<input type="text"/> <input type="text"/>	
E-mail Address:	<input type="text"/>	
Mobile Phone Number:	<input type="text"/>	
Club:	<input type="text"/>	
Car Reg No.:	<input type="text"/>	
Colour of ... Shirt/Top	<input type="text"/>	
Jumper/Fleece	<input type="text"/>	
Trousers	<input type="text"/>	
Jacket	<input type="text"/>	
Waterproof Trousers	<input type="text"/>	
I.C.E. contact person:		
Name:	<input type="text"/>	
Phone No.:	<input type="text"/>	
Entry Fee €25.00 (A donation will be made to West Waterford Hospice)		
I confirm and certify that I have read and understand the conditions above and that I am free from all physical illnesses and defects which would endanger my life or cause inconvenience to the organisers or to other participants in any way whatsoever, and I hereby undertake not to hold anybody responsible for any mishap, injury or damage to me or my property whatever the cause.		
Signed:	<input type="text"/>	
Date:	<input type="text"/>	
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Office Use Only		