





Church/Chapel ..... Date.....

Parish.....

Local Co-ordinator responsible for Bike Ride: Name.....email.....

[illegible]

Total number of visitors (this sheet):	BIKE:	CAR:	WALK:	OTHER:
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**Registered Charity Number: 271176**

**Please use both sides of this sheet, fill in the total, and return with white Church/Chapel payee return form – please do send this in even if you think you have no participants, as you may have supporters online.**