



## REGISTRATION FORM

Friday 15 - Friday 22<sup>nd</sup> September 2023



Contact Details	
Title:	Full Name:
Address:	
Email:	
Home Phone:	Mobile:
Which night will you be doing your Big Sleep Out?	
Other group members taking part:	

### Keep up to date:

What information would you like to receive from us? (please tick **all** that apply)

- News** (including **volunteering** information, **updates** on our work, **newsletters** etc.)
- Events** (including **concerts**, **talks** and **sponsored events** like Big Sleep Out etc.)
- Campaigns** (**appeals** for food, donations, toiletries, **fundraising information**, etc.)
- I do not** wish to receive any information from you

How would you like us to communicate with you? (please tick **all** that apply)

- Email**
- Post**
- Phone**

You can amend your choices about how or what we contact you about, or stop receiving communications from us at any time by emailing [enquiries@rainbow-centre.org](mailto:enquiries@rainbow-centre.org)

**Please return this form by email to:** [events@rainbow-centre.org](mailto:events@rainbow-centre.org) or by post to Big Sleep Out, Folkestone  
Rainbow Centre, 69 Sandgate Road, FOLKESTONE CT20 2AF