

TEAM REGISTRATION FORM

5:00 p.m.-9:00 p.m.

INCOMPLETE FORMS WILL NOT BE ACCEPTED! !

PHONE:

Email

- Circle shirt size: YS YM YL S M L XL 2XL 3XL 4XL

Team Name: _____ Team Captain: _____ Phone# _____

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Name (first/last): _____ Date of birth: _____

Phone : _____ Signature: _____

(Check as appropriate): __check __cash Amount: _____

☐ I am a cancer survivor (Free Admission/Shirt)

☐ I am under 12 (Free admission, no shirt)

☐ \$20.00 participant fee (12 and up)

☐ I am under 12 (Free admission, \$10.00 shirt)

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