

**2019 RACE IN THE PARK
TEAM ROSTER**
(Only For Paper Registrations)

Team Name:

Captain Name:

Capt. Phone (Day):

Please Enter Captain Info on First Line of First Sheet Only if not Registered Online.

Last Name	First Name	Mark Entry Fee Type With An "X"				\$15 T-Shirt Mailing	\$15 Bib and	Comp. <small>(In addition to entry fee)</small>	Donation	Check # Amount	Check/Cash
		Youth <small>(0 - 17 yrs)</small>	Standard Adult <small>18+ years</small>	HealthCare Professionals	Guest Fee for Survivor Breakfast						
		X	X	X	X	X	X	\$0.00	#	\$0.00	

1											
2											
3											
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7											
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10											
11											
12											
13											
14											
15											
# OF ENTRIES THIS PAGE											
		x \$ 15 =	x \$ 30 =	x \$ 100 =	x \$15=	x\$15=		-	-	Total. Amt	
AMT TOTALS THIS PAGE									-	\$	

A SIGNED ENTRY FORM FOR EACH MEMBER ON YOUR ROSTER MUST BE INCLUDED IN YOUR ROSTER PACKAGE.

SUPPORTERS WHO CHOOSE TO MAKE A DONATION WITHOUT ENTERING AN EVENT ARE NOT TEAM MEMBERS.
LIST THESE PEOPLE ON THE 'FRIENDS ASKING FRIENDS' SHEET.