



Team Registration for Walk Kansas - 2018

Please complete the form below, providing information for each team member as well as yourself (captain), and register your team before **March 18 (start of Walk Kansas)**. We will continue to accept registrations until March 28th. The individual participant fee is **\$9.00** and Walk Kansas T-shirts are available for \$9 and a baseball tee for \$22 (plus tax). **Please provide an email for weekly Walk Kansas newsletters to be delivered. If you don't have email then you may request it to be mailed.**

Team Name: _____ Team Captain's Name _____

Captain's Mailing Address: _____ City: _____ Zip Code: _____

Captain's Daytime Phone: (____) _____ Company/Organization (if a workplace team) _____

Captain's E-mail: _____ Choose a challenge for your team: Challenge #1 Challenge #2 Challenge #3
(Challenge #1 requires 150 minutes/week per participant; Challenge #2 = 4 hours/week per participant, Challenge #3 = 6 hours/week per participant.)

| First and Last Name | E-mail Address for Newsletters | Mailing Address (Apt. # and Lot #) | City | Zip Code | Circle Size | | | T-Shirt Color | Pd Cpt. |
|---------------------|--------------------------------|------------------------------------|------|----------|-------------|----------|-----------|---|---------|
| | | | | | s xl | m xxl | lg 3xl | | |
| Captain | | | | | s xl | m xxl | lg 3xl | H. Purple H. Irish Green Baseball Tee | |
| 2 | | | | | s xl | m xxl | lg 3xl | H. Purple H. Irish Green Baseball Tee | |
| 3 | | | | | s xl | m xxl | lg 3xl | H. Purple H. Irish Green Baseball Tee | |
| 4 | | | | | s xl | m xxl | lg 3xl | H. Purple H. Irish Green Baseball Tee | |
| 5 | | | | | s xl | m xxl | lg 3xl | H. Purple H. Irish Green Baseball Tee | |
| 6 | | | | | s xl | m xxl | lg 3xl | H. Purple H. Irish Green Baseball Tee | |

To complete team registration, return this form with payment of registration fees and t-shirt fees (optional) to: **110 S 6th St, Rm 7, Burlington, KS 66839**
 Please make checks payable to: **KSRE- Coffey County**

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|---------------------|----------------|------------------|----------|-----------|
| For Office Use Only | Person Paying: | Check # or Cash: | Amt Pd.: | Date Pd.: |
|---------------------|----------------|------------------|----------|-----------|