



Team Registration for Walk Kansas - 2017

Please complete the form below, providing information for each team member as well as yourself (captain), and register your team before **March 25th**. The individual participant fee is **\$8**. **Please note that newsletters will only be delivered by email. We will print and have paper copies at each office for those who don't have email.**

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	Pd Cpt.
Captain					
2					
3					
4					
5					
6					

To complete team registration, return this form with payment of registration fees to: the Marais des Cygnes District Extension Office in Paola or Mound City. **Please make checks payable to: Marais des Cygnes Extension**

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