

Grand River Area Family YMCA CORPORATE CHALLENGE



Number of extra t-shirts needed: _____

Color of t-shirt:

1st choice: _____

2nd choice: _____

Team Name: _____

Company Name(s): _____

Team Captain: _____

Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Home Phone: _____

E-Mail: _____

No	Participant's Name	Address	Phone	Shirt Size	YMCA Non-Member
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					