

# 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: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

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

**MAY ROSTER UP TO 60 PEOPLE**