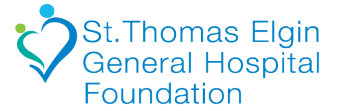




GET STARTED
Team Registration Information



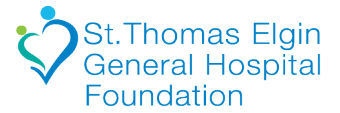
Team Name:		
Team GM:		
Gender:	<input type="checkbox"/> F	<input type="checkbox"/> M
Age:		
Address:		
City:	Province:	Postal Code:
Phone:	Email:	
<input type="checkbox"/>	<i>I have read the rules, understand, and agree to comply by them.</i>	
<input type="checkbox"/>	<i>I have read and signed the waiver and have returned it to the STEGH Foundation office.</i>	
Signature (required):		

Team Name:		
Team Member # 1:		
Gender:	<input type="checkbox"/> F	<input type="checkbox"/> M
Age:		
Address:		
City:	Province:	Postal Code:
Phone:	Email:	
<input type="checkbox"/>	<i>I have read the rules, understand, and agree to comply by them.</i>	
<input type="checkbox"/>	<i>I have read and signed the waiver and have returned it to the STEGH Foundation office.</i>	
Signature (required):		

Team Name:		
Team Member # 2:		
Gender:	<input type="checkbox"/> F	<input type="checkbox"/> M
Age:		
Address:		
City:	Province:	Postal Code:
Phone:	Email:	
<input type="checkbox"/>	<i>I have read the rules, understand, and agree to comply by them.</i>	
<input type="checkbox"/>	<i>I have read and signed the waiver and have returned it to the STEGH Foundation office.</i>	
Signature (required):		



GET STARTED
team registration information



Team Name:		
Team Member # 3:		
Gender: <input type="checkbox"/> F <input type="checkbox"/> M	Age:	
Address:		
City:	Province:	Postal Code:
Phone:	Email:	
<input type="checkbox"/>	<i>I have read the rules, understand, and agree to comply by them.</i>	
<input type="checkbox"/>	<i>I have read and signed the waiver and have returned it to the STEGH Foundation office.</i>	
Signature (required):		

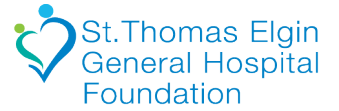
Team Name:		
Team Member # 4:		
Gender: <input type="checkbox"/> F <input type="checkbox"/> M	Age:	
Address:		
City:	Province:	Postal Code:
Phone:	Email:	
<input type="checkbox"/>	<i>I have read the rules, understand, and agree to comply by them.</i>	
<input type="checkbox"/>	<i>I have read and signed the waiver and have returned it to the STEGH Foundation office.</i>	
Signature (required):		

Team registration forms and waivers must be returned to the STEGH Foundation no later than Friday, February 10th, 2017.

We, as a team agree to raise funds for STEGH's Great Expansion and new CT Scanner. We understand and agree to comply with the rules. And most importantly, we agree to have fun!



GET STARTED
team information



Team Name: _____

Walk Up Song: _____

Member #1: _____

Biography (30 words): _____

Member #2: _____

Bio: _____

Member #3: _____

Bio: _____

Member #4: _____

Bio: _____

Captain: _____

Team Inspiration (50 words): _____
