



# Warrior Extreme Challenge Registration Form

## Alumni and Public

April 8, 2018 @ 11AM



Participant Name:

Home Address:

E-Mail:

Cell Phone:

Birthdate:

*Month Day Year*

**Alumni Public**

Participant Status:



Individual      Partner      Group

Participant is registering as (check the following):

If participant has a partner, indicate their name:      First Name      Last Name      Age (only if under 10)

\*Each participant still has to register and fill out their own form

If participant has a group, indicate their names:      First Name      Last Name      Age (only if under 10)

\*Each participant still has to register and fill out their own form

First Name	Last Name	Age (only if under 10)

\$12

Registration Fee:   
 (check the following)   
*Includes a short sleeve T-Shirt*

Shirt Size:       Type of Payment:

*Sizes include: S, M, L, XL, XXL*

\*\*Registration must be in by March 21st to ensure t-shirt size.

After that, you will receive whatever size is available.

Another participant is paying my registration fee

I am paying for other participant's registration fee

Liability Waiver:  \*Check if completed

Time Slot: \*Your time slot will be communicated with you

\*Must be signed and sent in with the Registration Form

via e-mail (time slots are between 11am and 12:45pm)

