

Team Registration for Walk Kansas - 2024

Captain's Mailing Address:	Citv:	am Captain's NameZip Code				ode:			
Captain's Davtime Phone: ()		Company/Organization (if a workplace team)					_		
Captain's E-mail:Challenge #1 requires 150 minute Challenge #4 = 6 hours/week per	es/week per participant; Ci								
First and Last Name	E-mail Address for Newsletters	Mailing Address (Apt. # and Lot #)	City	Zip Code	e Circle Size		T-Shirt Size Color		Pd Cpt
Captain						m xxl	lg 3x 4x	Lavender Blue Lagoon	
2					s xl	m xxl	lg 3xl 4x	Lavender Blue Lagoon	
3					s xl	m xxl	lg 3xl 4x	Lavender Blue Lagoon	
4					s xl	m xxl	lg 3xl 4x	Lavender Blue Lagoon	
5					s xl	m xxl	lg 3xl 4x	Lavender Blue Lagoon	
6					s xl	m xxl	lg 3xb 4x	Lavender Blue Lagoon	