

FAMILY TEAM INFORMATION FORM

PLEASE NOTE: Family Team name will appear exactly as listed below in publicity recognition listings. (Use additional sheets as needed.)

FAMILY TEAM NAME _____

TEAM CAPTAIN _____

ADDRESS _____

CITY/STATE/ZIP _____

HOME PHONE _____ ALTERNATE/CELL _____

E-MAIL _____

List your team members and shirt sizes below:
(Please list all "Couch Potato" participants who want to receive Family Team shirts as well.)

Name	Shirt Size	Name	Shirt Size
1.		9.	
2.		10.	
3.		11.	
4.		12.	
5.		13.	
6.		14.	
7.		15.	
8.		16.	



Please return completed form by March 24, 2012 to Elizabeth Mayer at CCVI, 3101 Main St., Kansas City, MO 64111, or e-mail to emayer@ccvi.org, or fax to 816-753-7836.

OFFICIAL USE ONLY:	DATE: _____
SHIRTS ORDERED: _____SMALL _____MEDIUM _____LARGE _____XLARGE _____XXLARGE	
BATCH NUMBER: _____	TOTAL: _____

