



FAMILY TEAM

REGISTRATION FORM



Must be handed in by 9:55 AM
(15 minutes before the start of the 5K)

Family Name: _____

Family "Captain": _____

Phone number: _____

E-mail: _____

First Name, Last Name

Bib Number

- | | | |
|-----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |
| 5. | _____ | _____ |
| 6. | _____ | _____ |
| 7. | _____ | _____ |
| 8. | _____ | _____ |
| 9. | _____ | _____ |
| 10. | _____ | _____ |

Note: Final score equals the top three (3) cumulative times of the immediate family members.
"Immediate Family" represents children, parents, guardians, grandparents and people residing at the same address.

I hereby certify that all members of the team are from the immediate family and that they are properly registered in the 2010 Park Ave BMW 5K.

Signature of the Family "Captain": _____