



Team Registration Form

Team Name:	
Total Team Mileage Goal: (check one)	
1. Team Captain's Name:	
Captain's Email Address:	
Team Members:	
2	Check type of team:
3	This is a WALMING TRANS
4	This is a WALKING TEAM .
5	This is a RUNNING TEAM .
6	
Team is made up of people from: (please check a	II that apply)
Work-site Church School	Family Neighborhood
Community organization (name of organia	zation)
Other (specify)	

Please submit forms by one of the following methods:

- Save and attach as a document to lyeley@utk.edu
- Print and fax to: UT Extension, Carroll County 731-986-1979
- Take/mail to: UT Extension Carroll County 625 High Street Suite 107 Huntingdon, TN 38344

All team and individual forms are due no later than August 30, 2019.

Sponsored by UT Extension, Carroll County and Carroll County Coordinated School Health

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