



TEAM ENTRY FORM

Team name: _____
Contact name: _____
Address: _____
City: _____ State: _____ Zip: _____
Country: _____
Phone number: _____
E-Mail: _____
Hosting Rotary Club: _____
Host contact name: _____
Host contact phone: _____

Yes, we have a qualified race skipper.
 No, we need to have a race skipper assigned to our team.
 Number of team members.

Shirt sizes:

Skipper Sml Med Lrg Xlg
Crew 1 Sml Med Lrg Xlg
Crew 2 Sml Med Lrg Xlg
Crew 3 Sml Med Lrg Xlg

The fee for each team is \$600, an entry of \$100.00 (U.S. Dollars) and a minimum \$500.00 (U.S. Dollars) donation is required for Rotary Sponsorship.

Please send a check payable to:
The Friends in Need Foundation of the Ellicott City Rotary Club, Inc.
PO Box 64
Ellicott City MD USA 21041