

## TEAM REGISTRATION FORM (for prize eligibility)

In **BRAZOS** county please complete this form and send to the address/fax/e-mail below by **February 18, 2011** to finalize your enrollment in Walk Across Texas! (e-mail preferred)

Name: Sara Mendez, Brazos County Health Department, Director of Health Education

Address: 201 N. Texas Avenue, Bryan, TX 77803

Fax: (979) 823-2275

E-mail: [brazoscountywat@yahoo.com](mailto:brazoscountywat@yahoo.com) (please add WAT to the subject line)

Team Name: \_\_\_\_\_

Team Captain's Name: \_\_\_\_\_

Captain's Phone: \_\_\_\_\_

Captain's Address: \_\_\_\_\_

Captain's E-mail Address: \_\_\_\_\_

**Walking teams have 7 members plus a captain. My team is made up of the following people (from the individual registration forms):**

Name	Telephone Number	E-Mail Address
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____

**Team goals:**

- To enjoy the exercise of walking with family, friends, and co-workers during Walk Across Texas!
- To record on your walking log the miles that you walk, bike, or jog.
- To encourage your teammates and others to complete their journey.
- To have fun!



*Updated January 2011*

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