

2010 Bellin Run Corporate Challenge Team Registration

Please mail to: Bellin Health System, Bellin Run Corporate Challenge
744 S. Webster Avenue, P.O. Box 23400, Green Bay, WI 54305-3400, Or, Fax to (920) 499-7924

Company Name (please list name how it should appear in publications/website):

Corporate Captain: _____

Direct Phone Number: _____

Cell Phone Number: _____

Email Address: _____

Corporate Captain Jacket/Shirt Size:

Mens: S M L XL XXL or Womens: XS S M L XL

Mailing address where materials/t-shirts should be sent:

Company Address: _____

City, State, Zip: _____

Company General Phone Number: _____

Fax Number: _____

Employee Total (@Company): _____

(This is a company wide total, not the total doing the Bellin Run)

Does your company want VIP delivery? YES NO

If yes, do you want family & friends delivered? YES NO

Does your company want a team picture? YES NO

Is company paying any of the registration fee? YES NO

If yes, there are four choices of payment, please
select how much the company will cover: \$5 \$8.50 \$12 \$17