



TEAM ROSTER

1. Complete the form by tabbing/clicking from one field to the next, typing in your team information as you go.
2. Be sure to check the "Leader" box for your team leader(s).
3. Save and return this completed form to Amy Acosta at amyacosta@lenamac.org.

TEAM INFORMATION

TEAM NAME	TOTAL TEAM MEMBERS	MALES	FEMALES
TEAM ADDRESS			
ARRIVAL: DATE, TIME, AIRPORT, FLIGHT NUMBER		DEPARTURE: DATE, TIME, AIRPORT, FLIGHT NUMBER	

NAME		AGE	GENDER
<input type="checkbox"/> LEADER			<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
EMAIL			
ADDRESS			
CITY	STATE	ZIP CODE	
TALENTS/ABILITIES	MEDICAL CONDITIONS (INCLUDING ALLERGIES)		

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