



5th Annual Roxbury Rural Run
benefiting the Sauk Prairie Memorial Hospital Foundation
 Saturday, May 3, 2008 – 9:15AM Start

TEAM ENTRY FORM

Questions? Contact us at 608-643-7226 or foundation@spmh.org

Team Name _____
 (exactly as it will appear on shirt)

Team Logo Logo emailed to foundation@spmh.org (preferred) Logo enclosed for scanning No logo

Name/Logo Placement Left Sleeve Back of shirt across top No preference **(same placement for all)**

Contact Person _____ Phone _____

Address _____

City _____ State ____ Zip _____

Email _____

TEAM MEMBER INFORMATION

Base Team Entry Fee*				\$25.00
Team Member	Last Name	First Name	Adult Shirt Size S, M, L, XL, XXL	Imprint Fee*
1				2.50
2				2.50
3				2.50
4				2.50
5				2.50
6				2.50
7				2.50
8				2.50
9				2.50
10				2.50
11				2.50
12				2.50
13				2.50
14				2.50
15				2.50
16				2.50
_____ # Members @ \$15 Participant Entry Fee (required for all members*) =				
TOTAL				\$

*Base team fee and imprint fees are in addition to the regular \$15 entry fee per person. They cover the costs of the custom team imprint and additional handling required to process your shirt order.

Enclose an individual registration form for each team member. T-shirt information may be listed on the Team Entry Form only, but each member **MUST** sign the Waiver and Release that is included on the individual registration form in order to participate.

DEADLINE FOR TEAM ENTRIES IS APRIL 18, 2008. SORRY – NO LATE TEAM ENTRIES CAN BE ACCEPTED.

Team shirts will be distributed as a group. Team members will still need to sign in individually on race day to receive their bibs.