



Choose Health Live Well



Moon Walk 2010 Team Captain's Registration Summary

Each Team Captain is asked to complete the summary form and submit all completed registration forms to Mission Control. NOTE: each time you add participants to your team please submit an updated Team Captain's Registration Summary with the updated team information (see below).

Team Captain Name (Please Print)

Team Captain Signature

Name of Organization

Phone#

Fax#

Email

Team Information

Total number of team members (equal to number of registration forms): _____

Total number of participants new to Moon Walk: _____

Total number of participants new to Exercise: _____

SPECIAL NOTES

Team Captains – remember to register yourself!

1. Place the Team Captain's Registration Summary form on top of all completed registration forms.
2. Pull and paperclip together all registration forms that are requesting to be added to the QCHI Community email list.
3. Send all forms to the QCHI office (mailing address: Central Park Medical Pavilion 2, Suite-3100,1227 East Rusholme Street, Davenport Iowa 52803).
4. Please include a revised Team Captain's Registration Summary form with any future submissions.