

Total number of participants

HEALTHY HAYWOOD FITNESS CHALLENGE 2011 Registration

PLEASE PRINT CLEARLY

Name(s): You may list multiple names if everyone lives in the same house. (Please include first and last names)
NOTE: Each person must buy their own card.

Name 1 _____ Age _____

Name 2 _____ Age _____

Name 3 _____ Age _____

Name 4 _____ Age _____

Name 5 _____ Age _____

Name 6 _____ Age _____

Name 7 _____ Age _____

Address: _____

City _____ State _____ Zip _____

Phone Number: _____

E-mail: _____

Have you participated in the Fitness Challenge before? Yes No

How did you hear about the Haywood County Fitness Challenge? Circle all that apply.

Newspaper Flyer @ Work Word of Mouth Radio Website E-mail Participated in the Past