

SPORTS REGISTRATION FORM Captain's Cup 5K Run

NAME of UNIT / COM	MMAND / DEPARTMENT:	
COACH / MANAGER	NAME:	
CELL NUMBER:		
EMAIL:		
RUNNER 1 NAME:		
RUNNER 2 NAME:		
RUNNER 3 NAME:		
RUNNER 4 NAME:		
RUNNER 5 NAME:		
RUNNER 6 NAME:		
RUNNER 7 NAME:		
RUNNER 8 NAME:		
STAFF USE (please do not write here)		
Date Received:		Staff Initials: