

HUNGER WIPEOUT OBSTACLE CHALLENGE

A Summer Tumbler to End Childhood Hunger

FAMILY REGISTRATION FORM

September 24, 2011 at the Chattanooga Area Food Bank

Family Team Name: _____

Street Address: _____

City: _____ State: _____ Zipcode: _____

Phone: _____ Email: _____

How did you hear about this event? _____

Family Members Participating:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Family Fee: \$15
Payment Options

_____ Mail a check payable to Chattanooga Area Food Bank. Send to us at 2009 Curtain Pole Road, Chattanooga, TN 37406 Attn: Hunger Wipeout

_____ Pay online by visiting www.chattfoodbank.org. Then mail or fax forms to us. Fax number is (423) 622-5874.

Please remember to have each family member sign and return a participant waiver along with this form to complete the registration process. We are excited you will be at this year's Hunger Wipeout!

