

TOM'S RUN

JUNE 3, 4, AND 5 2010
CUMBERLAND, MD TO BETHESDA, MD

A 200-MILE TEAM BUILDING RELAY RACE IN MEMORY OF
CWO4 TOM BROOKS, US COAST GUARD

Team Application – Only page 1 needs to be submitted. The other pages are for Team Leader planning. Page 1 can be mailed with a check or e-mailed to admin@tomstrunrelay.org. Payment can also be made with PayPal to admin@tomstrunrelay.org

General Information					
Team Name				Affiliation (e.g. USCG or company)	
Team Leader Info	Name				
	Address			Apartment/Unit #	
	City			State	ZIP
	E-mail			Phone	
Event Shirt Summary (compiled from shirt information)					
Race Shirt (Number of each size)	Small	Medium	Large	Other (show size)	Total
Long sleeve cotton (LS)					
Short sleeve cotton (SS)					
Men's UA Tech T					
Women's UA Tech T					
Total					
Fee Summary (compiled from team member information)					
Number of team members		X \$10.00 =			
Number attending pre-event dinner		X \$15.00 =			
Number of cotton shirts		X \$10.00 =			
Number of Men's UA Tech T		X \$20.00 =			
Number of Women's UA Tech T		X \$20.00 =			
Number of medals		X 0.00 =			
Number attending post-event lunch		X 0.00 =			
Please make checks payable to:	CGHQMWR		Total =		
If mailing a check, please send to:	Commandant (CG-523) U.S. Coast Guard 2100 Second St. SW Mail Stop 7126 Washington DC 20593-7126 Attn: Mr. R. K. Butturini				

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Vehicle Information (For Team Leader planning purposes. Submission not required)		
<i>Vehicle #1</i>		
Make:	Model:	State/License plate:
Contact:	Phone:	Government Vehicle Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>Vehicle #2</i>		
Make:	Model:	State/License plate:
Contact:	Phone:	Government Vehicle Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>Vehicle #3</i>		
Make:	Model:	State/License plate:
Contact:	Phone:	Government Vehicle Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>Vehicle #4</i>		
Make:	Model:	State/License plate:
Contact:	Phone:	Government Vehicle Yes <input type="checkbox"/> No <input type="checkbox"/>

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Team member information (For Team Leader planning purposes. Submission not required)																					
Team member name		Long sleeve cotton				Short sleeve cotton				Men Tech T				Women Tech T				Pre-dinner	Post-lunch	Medal	Total fee (+\$10 entry)
Emergency contact and phone		\$10.00				\$10.00				\$20.00				\$20.00				\$15.00			
		s	m	l	xl	s	m	l	xl	s	m	l	xl	s	m	l	xl				
1	Roger B																				
	Karin 540-253-9832			1														1	1	1	35.00
2																					
3																					
4																					
5																					
6																					

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Team member summary (For Team Leader planning purposes. Submission not required)																					
Team member name		Long sleeve cotton				Short sleeve cotton				Men Tech T				Women Tech T				Pre-dinner	Post-lunch	Medal	Total fee
Emergency contact and phone		\$12.00				\$12.00				\$25.00				\$25.00				\$17.00	\$8.00	\$6.00	
		s	m	l	xl	s	m	l	xl	s	m	l	xl	s	m	l	xl				
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		s	m	l	xl	s	m	l	xl	s	m	l	xl	s	m	l	xl				
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