

Team Registration for Walk Kansas - 2025

Please complete the form below, providing information for each team member as well as yourself (captain), and register your team before **April 04**. The individual participant fee is \$10. For **Apparel (t-shirts and more) order at www.shopwalkkansas.com**. **Please provide E-mail OR mailing address to indicate newsletter delivery method preferred.**

Team Name: _____ Team Captain's Name _____

Captain's Mailing Address: _____ City: _____ Zip Code: _____

Captain's Daytime Phone: (____) _____ Company/Organization (if a workplace team) _____

Captain's E-mail: _____ Choose a challenge for your team: #1 #2 #3 #4

(Challenge #1 requires 150 minutes/week per participant; Challenge #2 = 200 minutes/week per participant; Challenge #3 = 4 hours/week per participant, Challenge #4 = 6 hours/week per participant.)

First and Last Name	E-mail Address for Newsletters	Mailing Address (Apt. # and Lot #)	City	Zip Code	Circle Size			T-Shirt Color	Pd Cpt.
					s xl	m xxl	lg 3x 4x		
Captain					s xl	m xxl	lg 3x 4x	Amethyst (purple) Cement (gray)	
2					s xl	m xxl	lg 3xl 4x	Amethyst (purple) Cement (gray)	
3					s xl	m xxl	lg 3xl 4x	Amethyst (purple) Cement (gray)	
4					s xl	m xxl	lg 3xl 4x	Amethyst (purple) Cement (gray)	
5					s xl	m xxl	lg 3xl 4x	Amethyst (purple) Cement (gray)	
6					s xl	m xxl	lg 3xb 4x	Amethyst (purple) Cement (gray)	

To complete team registration, return this form with payment of registration fees to: **Marais des Cygnes District Paola – 913 N Pearl Suite 1, Paola, KS 66071 or Mound City – 115 S 6th/P.O. Box 160 – Mound City, KS 66056** Please make checks payable to: **Marais des Cygnes District or MdC District**

For Office Use Only	Person Paying:	Check # or Cash:	Amt Pd.:	Date Pd.:
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