

Finally a program for everyone!

Welcome to



Team Registration form:

After you have completed (step 1) the online registration, use this form to complete your team registration. Please return the information below along with \$10 per team member minus the fees for members who reach both of their exercise and weight loss goals from the January 2009 contest. Use the team number e-mailed to you from your online registration.

Team number: _____

Team Captain: _____ Phone: _____

Facility Name: _____ Email: _____

Mail code: _____ Total Members: _____ Free Members: _____

Return your check or money order made out to Wellness Council of NE Ohio to
433 S. State Street
Painesville, Ohio 44077