

REGISTRATION FORM

July 23, 2016
Freaky Kon-Tiki
Hampton River Raft Race

Team Name: _____

Captain's Name: _____

Address: _____

City/State/Zip: _____

Contact #: _____

Email: _____

CrewMembers:

_____ Sub _____

Sub _____ Sub _____

\$25 Registration Fee: Paid check _____ Paid cash _____