

TEAM SIGN UP

Business Sponsor Name: _____ Chamber Member: Yes No

Team Name: _____

Team Captain: _____ Phone Number: _____

Team Email: _____

Businesses that are members of the Leesburg Area Chamber of Commerce are welcome to participate for the Member price of \$100 per participant, Non-Members may participate for \$125 per participant. All Participants once fees are paid will have access to the LRMCC Wellness Center and Anytime Fitness.

	Participant Name	Phone Number	Email	Completed Release
1				
2				
3				
4				
5				

Please Return to the Chamber by Friday, February 26th

Please ensure that all Participant Fees accompany this form. Please make checks payable to:

The Leesburg Area Chamber of Commerce

To make arrangements to pay with a credit card call 352-787-2131

OFFICE USE ONLY

Chamber Member # _____

Payment Received _____

Team Captain
Added to Email
Confirmation _____

