

# Row for Kids Festival Team Entry Form



Team Name:	Practice Schedule – Check Preference		
Company/Group:	Mon. 6:00pm-7:30pm <input type="checkbox"/>	7:30pm-9:00pm <input type="checkbox"/>	
Address:	Tues. 6:00pm-7:30pm <input type="checkbox"/>	7:30pm-9:00pm <input type="checkbox"/>	
	Wed. 6:00pm-7:30pm <input type="checkbox"/>	7:30pm-9:00pm <input type="checkbox"/>	
Team Contact:	Thurs. 6:00pm-7:30pm <input type="checkbox"/>	7:30pm-9:00pm <input type="checkbox"/>	
Telephone:	Fri. 6:00pm-7:30pm <input type="checkbox"/>	7:30pm-9:00pm <input type="checkbox"/>	
Fax:	\$1,500 Entry Fee per team payable to Edmonton Rowing Club		
Email:			

	Participants Name	Address, City	Postal Code	Email	Telephone	M/F	Date of Birth
1	COXIE:						
2							
3							
4							
5							
6							
7							
8							
9							
10							

Please return this completed form to: Catherine Block  
 By Mail to 705 Blackburn Crescent SW, Edmonton, AB T6W 1B3  
 Or by email at [cathyblock@shaw.ca](mailto:cathyblock@shaw.ca)