



Turkey Bowl Challenge

Registration Form

Contact Name.		Date.			
Team Registration					
	TEAM NAME:				
Team Captain	Name: Address: Phone:		awa	Prizes will be awarded for the most creative teams and the team that raises the most money!!!	
Player 2	Address: Phone:		cr tea		
Player 3	Address: Phone:		rai		
Player 4	Name: Address: Phone:				
		TOTAL REGISTRAT	\$100		
Total Amount Enclosed / To Be Charged:					
Additional Items	Donation	onation – I am unable to participate but would like to support OPARC, please accept my donation of:			
	Challenge	allenge Amount – My team raised these additional donations for OPARC!			
		Total Amount Paid			
Plea	Please make checks payable to: OPARC , 9029 Vernon Ave, Montclair, CA 91763				
Credit Card No.: Exp. Date:					
Cardholder Name:					
Card Type:		Visa Master Card Discover AME	X		
Billing Address:					
City, State, Zip					
Cardholder Signature:					

To guarantee that your total amount raised is entered in the challenge, please submit this form and funds to OPARC no later than Friday, November 7, 2014.

Mail: 9029 Vernon Ave, Montclair, CA 91763 <u>Event Location</u>: Brunswick Zone Upland

Attn: Amanda Willis 451 W. Foothill Blvd

Email: awillis@oparc.org
Phone: (909) 985-3116 x155
Fax: (909) 985-8579

Upland, CA