

Up 'til Dawn

Team Registration Form

"FIGHT THE YAWN!"



Make a difference in the lives of children and join Up 'til Dawn! Become a part of our campus-wide effort to support the life-saving treatment and research at St. Jude Children's Research Hospital®. Register your team to become a part of various fund-raising activities and our all-night finale event at which we stay "Up 'til Dawn" in honor of the patients and families of St. Jude.

Return form to _____
at _____ by _____.

Have questions or need more information?

Contact _____ at _____.

St. Jude patient, Peter, age 2

TEAM REGISTRATION

Team Captain _____ Team Goal _____

Team Name _____

Deposit paid by: cash check, check # _____

Team Captain

Address _____

Phone (____) _____ E-mail _____ T-shirt size _____

| Member Names | Phone | E-mail Address | T-shirt size |
|--------------|--------------|----------------|--------------|
| 1. _____ | (____) _____ | _____ | _____ |
| 2. _____ | (____) _____ | _____ | _____ |
| 3. _____ | (____) _____ | _____ | _____ |
| 4. _____ | (____) _____ | _____ | _____ |
| 5. _____ | (____) _____ | _____ | _____ |

_____ Date