



THE EVENING SUN

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INDIVIDUAL

COURSE: (circle one) SHORT LONG

Participant: _____ Gender: (circle one) MALE FEMALE

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone Numbers: _____

Shirt Size: (circle one) Small Medium Large XL XXL

TEAM

COURSE: (circle one) SHORT LONG

Team Name: _____ Team Captain: _____

Type of Team: (circle one) MALE FEMALE CO-ED

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone Numbers: _____

Shirt Size: (circle one) Small Medium Large XL XXL

Teammate: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone Numbers: _____

Shirt Size: (circle one) Small Medium Large XL XXL

Please indicate if your team will need a canoe (circle):
Yes we need a canoe OR No we do not need a canoe

RELAY (short course only)

Team Name: _____ Team Captain: _____

Type of Team: (circle one) MALE FEMALE CO-ED

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone Numbers: _____

Shirt Size: (circle one) Small Medium Large XL XXL

Teammate: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone Numbers: _____

Shirt Size: (circle one) Small Medium Large XL XXL

Please indicate if your team will need a canoe (circle):
Yes we need a canoe OR No we do not need a canoe