**Ted Houk Memorial Regatta**

**June 9th and 10th, 2018**

**Seattle, Washington**

**Team Entry Form-**

***to be submitted after the online registration has been completed.***

**Please print clearly – This form must be filled out completely**

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (one per club please)

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State/Province \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Participants: \_\_\_\_\_\_\_\_\_\_ x $60 = $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Late Entry Participants: \_\_\_\_\_\_\_\_\_\_ x $120 = $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Para Canoeist \_\_\_\_\_\_\_\_\_\_ x $25 = $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Saturday Dinners \_\_\_\_\_\_\_\_\_\_

Total = $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email this Entry Form with payment details to: [Jason.Frisk@seattle.gov](mailto:Jason.Frisk@seattle.gov) or

Mail payment and this Entry Form to: Green Lake Small Craft Center

5900 W Green Lake Way

Seattle, WA 98103

(phone 206-684-4074)

Checks: Make checks payable to: City of Seattle or C.O.S

Credit/debit cards: To pay by phone please contact Tamara Oki or Jason Frisk at the Green Lake Small Craft Center 206-684-4074

Payment amount $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name on card:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credit card #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry: \_\_\_\_\_\_\_\_\_\_\_\_ Visa/MasterCard/AmEx

- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - Office Use Only - - - - - -- - - - - - - - - - - - - - - -- - - - - - - - - - -

Amount Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Receipt No.: \_\_\_\_\_\_\_\_\_\_\_\_\_ Initials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_