



**Black History Legacy Bowl 2010 | Saturday, February 20<sup>th</sup>, 2010**

**Mind and Body Challenge Registration Form**

**Personal Information**

Last: \_\_\_\_\_ First: \_\_\_\_\_ M.I.: \_\_\_\_\_

Address: \_\_\_\_\_ Apt./Ste.: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

DOB: \_\_\_\_\_ Ethnic Group: \_\_\_\_\_ Gender:  Female  Male

**School Information**

School Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Counselor/Principal/Dean: \_\_\_\_\_

Address: \_\_\_\_\_ Apt./Ste.: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Emergency Contact Information**

Last: \_\_\_\_\_ First: \_\_\_\_\_ M.I.: \_\_\_\_\_

Address: \_\_\_\_\_ Apt./Ste.: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ Gender:  Female  Male

**Event Participation Information**

Team Name: \_\_\_\_\_

Individual Event: \_\_\_\_\_

Individual Event: \_\_\_\_\_