



TEAM REGISTRATION FORM

– COMPLETE ONE FORM PER TEAM –

All registrations received by June 1, 2019 will be entered into a prize drawing held at the 42nd Annual Silver Bell Awards Dinner on June 6, 2019

It is not necessary to provide names of all team members at time of registration.

REGISTRATION FEE: \$3,800

COMPANY NAME

PAYMENT METHOD

CHECK PAYABLE TO THE SEAMEN'S CHURCH INSTITUTE

CREDIT CARD*†

*Credit card payments subject to a 2.9% transaction processing fee.

†If you do not wish to send this information electronically, return this form by post, or call to make payment securely by phone.

CARD NUMBER

EXPIRATION DATE

CARDHOLDER NAME

SIGNATURE

TODAY'S DATE

– RETURN ALL THREE PAGES OF THIS FORM BY AUGUST 30, 2019 –

Email to scimountainchallenge@seamenschurch.org with the subject line "Team Registration Form"
or return by post to

SCI Mountain Challenge • The Seamen's Church Institute • 50 Broadway, Floor 26 • New York, NY 10004

TEAM NAME

(OPTIONAL)

TEAM CAPTAIN / TEAM MEMBER 1

FIRST NAME

LAST NAME

COMPANY (IF APPLICABLE)

EMAIL

BUSINESS PHONE

CELL PHONE

COMPANY ADDRESS

CITY

STATE/PROVINCE

POSTAL CODE

COUNTRY

TEAM MEMBER 2

FIRST NAME

LAST NAME

EMAIL

CELL PHONE

COMPANY NAME/ADDRESS (IF DIFFERENT FROM TEAM CAPTAIN)

TEAM MEMBER 3

FIRST NAME

LAST NAME

EMAIL

CELL PHONE

COMPANY NAME/ADDRESS (IF DIFFERENT FROM TEAM CAPTAIN)

– ALL TEAM MEMBERS MUST COMPLETE INDIVIDUAL PARTICIPANT REGISTRATION FORM –