



TEAM TILLMAN

MEMBER PROFILE

Participant Information

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ E-mail: _____

Size Information

Male Female

Date of Birth: _____

Fitted Baseball Cap: Small/Medium Large/Extra Large

Shoe Size: _____

T-Shirt: Extra Small Small Medium Large Extra Large 2X Large

Shorts: Extra Small Small Medium Large Extra Large 2X Large

Pants: Extra Small Small Medium Large Extra Large 2X Large

Jacket: Extra Small Small Medium Large Extra Large 2X Large

General Information

How did you hear about Team Tillman? _____

What event will you be participating in? _____ Date: _____

Are you part of a team? Yes No Personal Fundraising Goal: \$ _____

Why are you running/raising funds and awareness for the Pat Tillman Foundation?

Participant Signature _____

Date _____

Please return completed form by fax (480) 621-4075, by e-mail mwojtulewicz@pattillmanfoundation.org or by mail 2121 South Mill Avenue, Suite 214, Tempe, Arizona 85282

If you have questions or need additional information, please contact Marcy Wojtulewicz, Deputy Director by phone (480) 621-4074 or e-mail.