

ANNEX J – REGISTRATION FORM – One form must be completed for each team.

Leavenworth High School JROTC
3RD Annual, *“First in the Nation” Raider Challenge*

SCHOOL: _____

TEAM NAME: _____

ADDRESS: _____

PHONE: _____ FAX: _____ E-MAIL: _____

INSTRUCTOR: _____

CELL PHONE NUMBER THAT YOU WILL HAVE AT THE MEET _____

TEAM MEMBERS

NAME (LAST, FIRST MI)	AGE	GENDER	SSN if flying on Blackhawks
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			

Please submit NLT 23 April 2010. Make checks payable to LHS JROTC. Email to registration form to wayne.cogdill@usd453.org , or fax 913-684-1555, or mail to: LHS JROTC, 2012 10th Ave, Leavenworth, KS 66048.

Fees can be paid at time of registration.