



Iso Series 12 hr. Adventure Race

Team Name: _____

Race Division (circle one): Two Person Co-ed Two Person Female Two Person Male

3-4 Person Co-ed 3-4 Person Female 3-4 Person Male

Team Captain:

Name _____ Sex _____ Phone _____

Address _____ City _____ State _____ Zip _____

Email _____

Emergency Contact _____ Phone _____

Team Members:

Name _____ Sex _____ Phone _____

Address _____ City _____ State _____ Zip _____

Email _____

Emergency Contact _____ Phone _____

Name _____ Sex _____ Phone _____

Address _____ City _____ State _____ Zip _____

Email _____

Emergency Contact _____ Phone _____

Name _____ Sex _____ Phone _____
Address _____ City _____ State _____ Zip _____
Email _____
Emergency Contact _____ Phone _____

Thank you for your interest in the IsoSeries Adventure Race

Please check the website for registration fees and race information (www.wfu.edu/~fallt14)

Make checks payable to: Todd Fallezen

Mail to:

IsoSeries Adventure Race

1200 Millerwood Dr.

Winston-Salem, NC 27106