



REGISTRATION FORM

What is your Team Name?

Name of the person (Team Representative)

Phone

Email

Shooter 1 Name:

Shooter 2 Name:

Shooter 3 Name:

Shooter 4 Name:

Would you like to be a sponsor?

- Yes, please contact me!
 No, thank you.



SELAH MENDIETA FOUNDATION

www.SmileLikeSelah.org