



# CHINO CORPORATE CHALLENGE 2017 Team Entry Form



Organization Name \_\_\_\_\_

Coordinator Name \_\_\_\_\_

Assistant Coordinator Name \_\_\_\_\_

Organization Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Organization Phone No. \_\_\_\_\_

Coordinator Phone No. \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Fax \_\_\_\_\_

Please include the name and title of CEO, President, or Manager of your business:

\_\_\_\_\_

How many people are employed with your company? \_\_\_\_\_

What are your business hours? \_\_\_\_\_ Best time to contact you? \_\_\_\_\_

How many years has your company participated in Corporate Challenge? \_\_\_\_\_

Team Shirt Color \_\_\_\_\_

\_\_\_\_\_  
Signature of Organization Executive

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Organization Coordinator

\_\_\_\_\_  
Date

**TEAM ENTRY FEES & TEAM ENTRY FORM  
DUE ON OR BEFORE FRIDAY, MARCH 31, 2017**

Please mail or forward form to:  
Carolyn Owens Community Center  
Attn: Corporate Challenge  
13201 Central Avenue  
Chino, CA 91710