

2019 MENDO HUMAN RACE ENTRY FORM

BANK NIGHT - WEDNESDAY MAY 1ST

(YOU MUST SUBMIT DOCUMENTATION VERIFYING AGENCY'S TAX-EXEMPT STATUS)

CHECK AGENCY TYPE:

501C3

TAX-SUPPORTED ENTITY(SCHOOL/GOVERNMENT)

FAITH - BASED ORGANIZATION

AGENCY NAME					AGENCY TAX ID#
PROGRAM NAME (IF DIFFERENT FROM AGENCY NAME)					
AGENCY'S MAILING ADDRESS		STREET/SUITE	CITY	STATE	ZIP
AGENCY'S PHYSICAL ADDRESS (IF DIFFERENT FROM MAILING ADDRESS)		STREET/SUITE	CITY	STATE	ZIP
AGENCY'S MAIN PHONE NUMBER			AGENCY'S FAX NUMBER		
WEBSITE ADDRESS			AGENCY E-MAIL ADDRESS		
EXECUTIVE DIRECTOR		PHONE NUMBER		E-MAIL ADDRESS	
WHAT DOES YOUR AGENCY DO?					

BUSINESS RAISING MONEY FOR A CHARITY, PUT YOUR INFORMATION HERE!

BUSINESS NAME					
BUSINESS MAILING ADDRESS		STREET/SUITE	CITY	STATE	ZIP
BUSINESS MAIN PHONE NUMBER			AGENCY'S FAX NUMBER		

HUMAN RACE TEAM COORDINATOR CONTACT INFORMATION

NAME		DAY TIME PHONE NUMBER	
E-MAIL ADDRESS		EVENING PHONE NUMBER	
2018 FUNDRAISING GOAL \$ _____		ARE YOU NEW TO HUMAN RACE? <input type="checkbox"/> YES <input type="checkbox"/> NO WHAT YEAR DID YOU LAST PARTICIPATE IN HUMAN RACE _____	