

Registration Form

Please register me for the Plunge in:

	Chattanooga	Clarks	/ille	le Dicks		on Jack		Knoxville
		anon	Men	nphis	Nas	shville	Unio	on City
Name								
Street Add	ress							
City			Stat	e		Zij	o Code	
	StateZip Code							
E-Mail								
Employer/S	School							
Organizatio	on (civic club, stude	nt organiza	ntion, chu	ırch grou	p, law e	nforceme	nt agency	etc)
I am registe	ering as:							
Individual(All plungers will sig	Member of 7	eam	ers under 18	years of age	must have	a parent or g	uardian signati	
My Shirt Si	ze (circle one)	S	М	L	XL	XXL	XXXL	
Mail or fax t	the completed fo	rm to:						
Special Oly 461 Craighe Nashville, T Fax: 615-32	N. 37204	e						
please	contact me abo	ut how I c	an help	plan th	e Pola	r Plunge	!	