

Greater Life Chiropractic & GCCC Lifestyle Challenge

2022 Registration

Participant Name:	
Teammates:	
(Teams of 2-6)	
Team Name:	
Team Name:	9
Phone:	
E-mail Address:	
(Required)	
Payment is REQUIRED with registration!	(Unless paid by employer)
Paid(\$40.00 per i	ndividual, \$30 if paid by
your employer's check or credit card.)	
If your employer is paying, please comple	ete information below:
Employer Name:	
Limproyer Maine.	The financial formation of the company of the compa
Contact Person Name:	

Each Participant MUST complete a form.

RETURN THIS FORM TO THE GCCC

To speed up initial weigh-in day, early registration is recommended prior to April 8th



