



TEAM CAPTAIN SIGNUP FORM

Yes, I am interested in organizing a team of walkers to participate in NAMIWALKS for the Mind of America event here in Ventura on May 2nd, 2009.

If you will be a primary Team Captain for your team, please complete this section:

Name: _____

Phone #: _____ E-mail Address: _____

Mailing Address: _____

City: _____ State: _____ ZIP Code: _____

Please list the name of the family, business, organization, service provider or affiliate your team will be representing in the Walk: _____

Our team name will be (complete if known): _____

Our team goals are: Walkers: _____ Dollars: _____ (Number of walkers x \$100)

If you will be helping a primary team captain as an assistant team captain, complete this section.

Name: _____

Phone #: _____ E-mail Address: _____

Mailing Address: _____

City: _____ State: _____ ZIP Code: _____

Name of family, business, organization, service provider or affiliate your team will be representing:

Please note the name of your team's primary team captain(s): _____

Please return this completed form to:

Ratan Bhavnani

NAMI Ventura County

P.O. Box 1613, Camarillo, CA 93011

Tel: (805) 641-2426 Fax: (805) 275-2188

Email: namiventura@gmail.com Web: www.namiventura.org