



2010 Fort4Fitness Group Packet Pick Up Request Form

Note: Your organization must have a **minimum of six** members in order to qualify for group packet pick up. Attach additional sheets if necessary. Mail or fax this form to **Fort4Fitness, PO Box 9007 Fort Wayne, IN 46899 Fax: (260) 436-1507** so that it **arrives by 9/22/2010**. Your primary or alternate contact must pick up your group's packets in person during the normal packet pick up hours on 9/24/2010. Look for the special Group Packet Pick Up booth on 9/24. Please print all information clearly. Complete Parts 1 and 2 now. Part 3 will be completed when packets are picked up.

Part 1 – Identify Organization/Contacts

| | | | |
|---------------------------------|-----------|---|-------|
| Organization Name | | | |
| Primary Contact First Name | Last Name | City | State |
| Primary Contact Email Address | | Telephone <input type="checkbox"/> Day <input type="checkbox"/> Eve <input type="checkbox"/> Cell | |
| Alternate Contact First Name | Last Name | City | State |
| Alternate Contact Email Address | | Telephone <input type="checkbox"/> Day <input type="checkbox"/> Eve <input type="checkbox"/> Cell | |

Part 2 – Identify Groups Members and Packets to Pull

| | Bib No (if known) | F4F Use | | | |
|--|--|--------------------------|-------|--|--------------------------|
| I certify that the people listed in Part 2 below are aware that their packet will be picked up by the primary or alternate contact on 9/24/2010. | Pull the packet for the Primary Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> | | | |
| Signature of Primary/Alt Contact Completing Form _____ Date _____ | Pull the packet for the Alternate Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> | | | |
| First Name | Last Name | City | State | | |
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Part 3 – Pick Up Information (complete when packets are picked up on 9/24/2010)

| | | |
|---|---|--|
| | | F4F Use Only |
| Printed Name of Person Picking Up Packets _____ | 9/24/2010 @ _____ : _____ PM Date/Time | Packets Pulled By _____ |
| Signature of Person Picking Up Packets _____ | F4F Official Initials _____ | Date <input type="checkbox"/> Notified |

