

# WALK *Across* Tennessee



## Registration Form

Team/ Individual Name: \_\_\_\_\_ Team Captain's Name: \_\_\_\_\_

Captain's Email Address: \_\_\_\_\_

Team is made up of people from: *(please circle the one that applies)*

Work-site    Church    School    Family    Neighborhood    Other    Individual

Name of worksite or organization \_\_\_\_\_

<p><b>Goals Abbreviations:</b>  <b>M</b>- Move More  <b>SL</b>- Sleep better  <b>W</b> – Weight Loss  <b>BP</b> – Improve Blood Pressure  <b>ST</b> – Lower Stress  <b>G</b> – Improve Blood Glucose  <b>E</b> – Increase Energy</p>
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Team Members' Names or Individual Name <i>If Team, List Captain's Name First</i>	Email Address	Gender	Ethnic Background	Goals

Please submit registration forms no later than **September 15**. Start counting miles September 7.

- email to [shardin4@utk.edu](mailto:shardin4@utk.edu)
  - mail to UT Extension, P.O. Box 415, Columbia, TN 38402

