

MOLOKAI HOE 2009

FINAL CREW REGISTRATION FORM

CLUB NAME: _____

CANOE NUMBER: _____

COACH: _____

DIVISION:

OPEN: _____

MASTERS 40+: _____

MASTERS 50+: _____

MASTERS 55+: _____

MASTERS 60+: _____

CLASSIFICATION:

KOA: _____ NON-KOA: _____

PADDLER NAME (Please print clearly) DATE OF BIRTH/PROOF OF AGE VERIFIED

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.

CANOE INFORMATION:

NAME OF CANOE: _____

COLOR OF HULL: _____ MANU: _____ CANVAS: _____

Coaches Signature: _____

Contact phone # _____

OHCRA/MO-3 Rev:6/09

IMPORTANT NOTE: PLEASE COMPLETE THIS FORM ON YOUR COMPUTER USING THE FILLIABLE FORM FIELDS ABOVE. THEN PRINT YOUR COMPLETED FORM AND FAX BACK TO THE MOLOKAI HOE RACE COMMITTEE AT **1-888-688-3769**. THIS IS A TOLL FREE FAX NUMBER. THANK YOU FOR YOUR COOPERATION. PLEASE DO NOT HAND WRITE THIS FORM. MAHALO!