



9th Annual Gateway Dragon Boat Festival
June 25, 2016
Team Roster

Team Name:		Company/Org.:	
Team Captain:			
Crew Member Names		Waiver Signed (check when complete)	Waiver Verified (office use only)
Drummer (mandatory):			
1 (Captain if paddling):			
2:			
3:			
4:			
5:			
6:			
7:			
8:			
9:			
10:			
11:			
12:			
13:			
14:			
15:			
16:			
17:			
18:			
19:			
20:			
21 (alternate):			
22 (alternate):			
23 (alternate):			
24 (alternate):			
25 (alternate):			
Team Requirements: 1 Drummer, (Steersperson will be provided) At least 8 paddlers must be female.			

Bring completed form to first practice **OR send by June 20, 2016 to:**

Signature Healthcare Foundation
5139 Mattis Road, Suite 103 St. Louis, MO 63128
or Fax: (314)843-1140

To be signed prior to receipt of team wristbands:

I certify that the above listed crew members are the only participants on my team in the race and each of them have submitted a signed waiver.

Team Captain: _____ Date: _____