

**Relay for Life – Information Sheet  
Lyman Band Team**

Please return this form ASAP  
Via fax: 407-659-9171  
Email: [admin@lymanband.com](mailto:admin@lymanband.com)

Participant Information		
Name:	Home Phone:	
Street Address:	City:	
If student - Grade	Band or Guard:	Email:

Emergency Contacts	
Name:	Cell:
Name:	Cell:

**When will you be available to participate (check all)?**

Setup (4pm): \_\_\_\_ Event (7:00pm to 10:00am): \_\_\_\_ Clean-up (10am): \_\_\_\_  
If you need to arrive late or leave early, please indicate time and reason: \_\_\_\_\_

**Individual Fundraising Acknowledgement:** It is my goal to individually raise \$ \_\_\_\_ in advance of this event (online and/or collected).

**Additional Volunteers:** We need some helping hands throughout the entire event. Please list the name, contact info and available times for any family volunteers:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Team Supplies** (please check any that you can provide):

Tent (how big?):	Canopy (how big?):	ping pong table or supplies:	Battery operated lanterns:
case of water:	case of Gatorade:	snacks:	paper towels:
board games:	paper plates:	flashlights:	coolers:
Ice:	bug spray:		

**Individual Supplies** (what you should bring for yourself): toiletries, individual food items if needed, air mattress/sleeping bag, pillow, lounge chair, blankets, towels, change of clothes (consider warmer for evening and potential rain), extra shoes/socks, radio, playing cards, camera, sunscreen, hats/visors

**Please carefully read the following and sign:** I am participating in Relay for Life on a volunteer basis for the purpose of helping raise money to benefit the American Cancer Society. Besides the collective group effort (Lyman Band Team), I understand that I have an individual responsibility to help raise funds. While the Lyman Band Association (Band Boosters) is providing administrative support for this effort, it is an independent event and there is no formal (legal/fiscal) relationship to the Lyman Band Association. I understand that there will be a zero tolerance policy against alcohol, drugs, cigarettes, and inappropriate behavior and that I will be asked to leave if I do not follow the guidelines of the event.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_