



HAWAI'I PACIFIC HEALTH
GREAT ALOHA RUN
KE KUKINI ME KE ALOHA PAU'OLE

Lucky 7 Team Leader Form

Please write legibly and complete info. Attach this form as a top sheet to 7 completed GAR applications.

Team Name: _____

Team Captain: _____

Day/Cell Phone: _____

E-mail Address: _____

Team Member Information:

2.

Name

email

3.

Name

email

4.

Name

email

5.

Name

email

6.

Name

email

7.

Name

email

IMPORTANT, READ CAREFULLY!

For hardcopy registrations

Team Leader Directions:

1. Complete the team form.
2. Attach 7 completed and signed 2018 official entry forms.
3. Enclose \$280 check or money order payable to **Great Aloha Run**.
4. Mail all to:
Great Aloha Run
418 Kuwili St., Suite 102
Honolulu, HI 96817
5. Postmark by Jan. 25, 2019.

If not received as directed, team will be deemed ineligible for Lucky 7 participation.

Alaska[®]
AIRLINES