

# TRIVIA UNPLUGGED APPLETON REGISTRATION FORM

**NAME OF TEAM: (36 characters maximum, including spaces and punctuation)**


**TELEPHONE NUMBER** |\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|

**NUMBER OF PEOPLE ON TEAM** |\_\_|\_\_| **Maximum 10**

**TEAM CAPTAIN** |\_\_\_\_\_|

**EMAIL ADDRESS** |\_\_\_\_\_|

**PLEASE RETURN COMPLETED FORM TO [averhagen@capmail.org](mailto:averhagen@capmail.org)**

or:  
 CAP Services, Inc. Attn. Amy Verhagen  
 Trivia Unplugged  
 821 E. 1st Avenue. St. 3  
 Appleton, WI 54911

**REGISTRATION CLERK INITIALS:** |\_\_|\_\_|

**DATE REGISTERED:** \_\_\_\_/\_\_\_\_/21

**PAID \$200.00** |\_\_|

**TIME/DATE OF POSTMARK:** \_\_\_\_:\_\_\_\_\_ AM PM

\_\_\_\_/\_\_\_\_/21

**COMPUTER OPERATOR INITIALS:** |\_\_|\_\_|

**PAID \$220.00** |\_\_|

**ENTERED DATE:** \_\_\_\_/\_\_\_\_/21