Enclosure 1 to Annual RI Army National Guard International Parachute Competition, MOI

Team#
(Official use only)

REGISTE	RATION FORM	(Official use only)
Please type all the information and identify the Team Leade	r in the first position	
UNIT:		
UNIT (abbreviation):		
SERVICE: Army Navy Air Force	Marine Corps	
COMPONENT: Active Duty National Guard	Reserve	
COUNTRY:		
UNIT ADDRESS:		
TEAM INFO: LAST NAME	FIRST NAME	RANK GENDER
LEADER/CAPTAIN		
POINT-OF-CONTACT: NAME		
PRIMARY PHONE NUMBER	ALTERNATE NUMBER	
PRIMARY E MAIL	ALTERNATE EMAIL	
AWARDS BANQUET MEAL CHOICES (# PER COMPETITOR):	Chicken Salmon	Vegetarian
ADDITIONAL BANQUET TICKETS ARE AVAILABLE UPON REQUEST (Cos	st per person is \$50) NUMBER OF AD	DITIONAL TICKETS NEEDED
AWARDS BANQUET MEAL CHOICES (# PER GUEST):	Chicken Salmon	Vegetarian
INTERNATIONAL TEAMS ONLY		
		HOW MANY? # OF JM'S?
WILL YOU BE BRINGING WINGS AND CERTS FROM YOUR COUNTRY? IF YES-		
DO YOU REQUIRE BILLETING AT URI: DO YOU REQUIRE TRANSPORTATION FROM ARRIVAL AIRPORT TO URI?		

WHICH AIRPORT WILL YOU BE ARRIVING TO? PVD (T.F. GREEN) BOS (LOGAN)

ARRIVAL DATE/TIME: ARRIVAL FLIGHT NUMBER:

WHICH AIRPORT WILL YOU BE DEPARTING FROM? PVD (T.F. GREEN) BOS (LOGAN)

DEPARTURE DATE/TIME: DEPARTURE FLIGHT NUMBER: