



2009 "Walk for the Best"
Team Registration Form
Sunday September 20, 2009

**"Keeping Kids
 with Type 1 Diabetes Healthy
 until a cure is found"**



| | |
|----------------------|-----------------------------|
| Team Captain: | Team Name: |
| Address: | City/Town: |
| Postal Code: | Telephone: |
| Email: | Fundraising Goal: \$ |

**The following team members are committed to "Walk for the Best" and
 raise funds for the Charles H. Best Diabetes Centre!**

| First Name | Last Name | Phone #: | Email | GOAL |
|---|------------------|-----------------|-------------------------------|-------------|
| Charlie | Best | 905-666-7796 | Bestdiabetes@charleshbest.com | \$200.00 |
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| TOTAL NUMBER OF TEAM MEMBERS _____ | | | TEAM FUNDRAISING GOAL: | \$ |

Please fax, email or mail your registration to:
The Charles H. Best Diabetes Centre
900 VICTORIA STREET WEST
WHITBY, ONTARIO
L1N 9Z5
PHONE: 905.666.7796
FAX: 905.666.5579
EMAIL: bestdiabetes@charleshbest.com