PENGUIN PLUNGE REGISTRATION FORM

Thank you for participating in the Plunge! If you are not registering online, please complete this form and send to AshleyH@sonh.org

PERSONAL INFORMATION

Name _____ Date of Birth _____

Email Address _____ ☐ Home ☐ Work

Phone Number _____ ☐ Home ☐ Cell ☐ Work

Address _____ ☐ Home ☐ Work

City _____ State _____ Zip _____

Gender ☐ Male ☐ Female ☐ Other

PLUNGE INFORMATION

I am a: ☐ Plunger ☐ Pampered Penguin ☐ DIY

Team name _____ Team Captain's name_____

PAYMENT INFORMATION

I understand that by submitting the $50 Registration Fee, I agree to raise the minimum of an additional $350 (total of $400) to participate in the Penguin Plunge

Payment Method ☐ My check is enclosed.
☐ Email me a secure link to pay via credit card

LOCAL PROGRAM INFORMATION

All funds raised at the Penguin Plunge benefit Special Olympics New Hampshire. If you are affiliated with a specific Local Program (team of athletes supported by volunteers), you may designate up to 100% of your funds to the Local Program.

☐ No – I am raising funds for Special Olympics New Hampshire and all of its programs.

☐ Yes – I am raising funds for a specific Local Program of Special Olympics New Hampshire.

Please specify the Local Program of Special Olympics New Hampshire:

Percentage _____ Local Program _____

ADDITIONAL INFORMATION

Which of the following best describes you?

☐ American Indian/Alaska Native ☐ Black or African American ☐ White or Caucasian ☐ Asian American

☐ Native Hawaiian or Other Pacific Islander ☐ Hispanic or Latinx ☐ Prefer not to answer

☐ More than one race

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