

Registration Form
OU ASCE Scramble
October 3rd, 2009
12:00 PM

Your Information

<u>Name</u>	<u>E-Mail Address</u>	<u>Phone Number</u>	<u>18-Hole Handicap</u>

Requested Team Members (Optional)

<u>Name</u>	<u>E-mail Address</u>	<u>Phone Number</u>	<u>18-Hole Handicap</u>

***Requested team members must fill out a separate registration form. Just make a copy of this form and give it to them if they are not a civil engineering alumnus, faculty member, or student who received this application.

Give the completed application and your check to:

Justin Krantz
15 South Shafer St. Apartment 1404
Athens, Ohio 45701

330-447-6717
jk314006@ohio.edu