

2018 Congressional Fitness Challenge – Team Registration Form

Office Name (Member)	State-District if applicable		
Team Captain:		House	Senate
Team Captain Email:			
How many full-time staff does the office employ	?		
What percentage of staff are participating (must	t be at least 25%)?		
Is the Representative or Senator participating?	/es	No	
Email completed form to ACE's Direct (Sheila.Frank	t or of Government Rel a lin@ACEfitness.org)	ations, Shei	la Franklin
LAST DAY TO ENTE	R A TEAM IS JANUARY	19 th	
Team	Members		
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