



PACIFIC CANCER FOUNDATION

Access. Knowledge. Support.



# PADDLE *for* LIFE

## October 15-16, 2011 ENTRY APPLICATION

CREW NAME: \_\_\_\_\_ Date: \_\_\_\_\_

Paddler (First, Last Name) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

### CANOE INFORMATION

NAME OF CANOE: \_\_\_\_\_

COLOR: Hull \_\_\_\_\_ Manu \_\_\_\_\_ Canvas \_\_\_\_\_

Owner of Canoe: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### RACE EXPERIENCE

Is this the first crossing for your entire crew? YES \_\_\_\_\_ NO \_\_\_\_\_

If NO, how many have done the channel crossing to Lanai before? \_\_\_\_\_

Has your steersman done a Lanai channel crossing before? YES \_\_\_\_\_ NO \_\_\_\_\_

If YES, how many times? \_\_\_\_\_

If your entire crew has not crossed the Lanai channel before, what are you doing to prepare for this crossing?

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**Entry fee/minimum donation is \$150 per paddler.**

Please mail or fax this form with entry fee to:

Pacific Cancer Foundation, 95 Mahalani Street, Wailuku, HI 96793

Ph: (808) 242-7661 Fax: (808) 242-7616 Email: [njeff@pacificcancerfoundation.org](mailto:njeff@pacificcancerfoundation.org)

Checks should be made out to: **Pacific Cancer Foundation**

Pledge forms and **online payment** are available at [www.pacificcancerfoundation.com](http://www.pacificcancerfoundation.com)

*Pacific Cancer Foundation is a 501 c(3) and all donations are tax-deductible*