

**RELAY FOR LIFE of GREATER WINDHAM
CAMPSITE INFORMATION FORM**

Team Name: _____

Team Captain(s): _____

Team Captain(s) Contact Information:

➤ **Telephone:** _____

➤ **Email:** _____

Returning team: **Yes** **No**

Number of people on the team: _____

How many will be staying overnight? _____

How many tents or structures will you be putting on your space? _____

Do any of your team members have special needs (i.e., wheelchair, medical needs)?

Is your team planning a fundraiser on the day of Relay?

Recreational Vehicle Information

Campers can be no longer than 21' per ECSU. Camper space is on a first come first serve basis as space is limited. Preference will be given to teams with a survivor on the team who will be staying overnight. Please provide their name/names.

