

Registration Form

2020 Can Madness



Thank you for participating in the 11th annual Hopelink Can Madness tournament!

Participant Information:

Business Name

Business Address

City, State, Zip

Contact Person

Full-time: _____ Part-time: _____

Contact Phone

Total number of employees (full-time & part-time)

Contact Email

Preferred Social Media Tags (i.e: #HopelinkHelps)

Has your business ever participated in this event before? If so, for how many years?

What inspired you to participate in Can Madness? (Optional)

Yes, this is our _____ (ex: 3rd) year! No

Please give us one fun fact about your business or team: (For our Kick-off event!)

Weekly Weigh-Ins

Donations must be received every Friday between the hours of 10 a.m. and 2 p.m. in order to update bracket standings by the end of the business day. Please appoint a representative who will be responsible for delivering the food donations each week to your local Hopelink center, and plan to contact Pam at CanMadness@hopelink.org or at **425.897.3718** at the beginning of the week if you need to change your expected drop-off time that week.

Select the Hopelink center where you will deliver your donations each week:

Redmond Shoreline Kirkland Bellevue Sno-Valley*

*Sno-Valley weigh-ins will take place on Thursdays, as the center is closed on Fridays.

I acknowledge that Hopelink may use photos of my team or team members during weigh-ins or other Can Madness activities for promotion on social or other media.

Signature: _____ **Date:** _____

Please send your company logo in the highest possible resolution available.
Complete and sign this form by **February 14, 2020** and return to Pam at CanMadness@hopelink.org.

Any questions or concerns? Call or email us!

Direct: **425.897.3718** | Fax: **425.869.6035**

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