

First Name: Age:



| Full Name: | |
|---|--|
| Address: | |
| City, State, ZIP: | |
| Phone Number: | |
| Email Address: | |
| Age: | |
| Please return to: | |
| Emerald Credit Union 13201 Granger Rd. Suite 1 Garfield Heights, OH 44125 | |

All entries are due by Saturday, January 25, 2020 at 1:00 p.m.