

# Team Registration Form

**NOTE:** Please photocopy this registration form and complete one form for EACH team that you are entering. We would like to ensure as many schools as possible are able to participate in this event. There is no registration fee. Your registration is confirmed upon receipt of form.

School Name: \_\_\_\_\_

Name of student registering team: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

In which division are you registering?

Division III (Grades 7-9)

Division IV (Grades 10-12)

Your team name: \_\_\_\_\_

We have a teacher/coach.

Name of teacher/coach: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

We need a teacher/coach.

Please fax this form, by February 17, 2004, to:

Susanne Dow-Kuechle  
c/o Peace Country Science & Technology Hotline  
Fax: (780) 539-0522

\* APEGGA is collecting this information for use in promoting this event and may make it public by means of oral, printed or electronic publication.

