REGISTRATION FORM

ID STICKER

NAME OF TEAM: (36 characters maximum, including spaces and punctuation)

|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|

|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|

TELEPHONE NUMBER |___|___|___|--|_____|_____|_____|--|_____|_____|_____|_____| DORM |___|

IF PLAYING FROM A MOTEL, INCLUDE ROOM NUMBER |_____|_____|_____|

NUMBER OF PEOPLE ON TEAM |_____|_____|_____| (include all players)

TEAM CAPTAIN |_____|

ADDRESS OF TEAM HEADQUARTERS |_____|
DOES YOUR TEAM WANT TO BE CALLED FOR A "TRIVIA FOCUS" INTERVIEW?

YES NO (circle one) NUMBER OF UWSP ALUMNI ON TEAM |_____|

NAME AND EMAIL OF ANY
UWSP ALUMNUS ON TEAM|_____|

<u>MAILING ADDRESS FOR TRIVIA 49 CERTIFICATE:</u>
<u>PLEASE PRINT NEATLY, AND USE CURRENT INFORMATION</u>

NAME |_____|

ADDRESS |_____|

CITY, STATE ZIP |_____|_____|_____|

EMAIL ADDRESS |_____|

TRIVIA 49 STAFF SECTION:

REGISTRATION CLERK INITIALS: |_____|_____|_____|

DATE REGISTERED: ____/____/18

COMPUTER OPERATOR INITIALS: |_____|_____|_____|

ENTERED DATE: ____/____/18

REGISTRATION FEE
CHECK ONE

PAID $20.00 |_____|

PAID $40.00 |_____|

FREE |_____|