REGISTRATION FORM

ID STICKER

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

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

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

TELEPHONE NUMBER |____|____|____|--|____|____|____|____| **PLAYING FROM 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 OF UWSP ALUMNUS ON TEAM |_____|

MAILING ADDRESS FOR TRIVIA 41 CERTIFICATE:
PLEASE PRINT NEATLY, AND USE CURRENT INFORMATION

NAME |_____|

ADDRESS |_____|

CITY, STATE ZIP |_____|_____|_____|

EMAIL ADDRESS |_____|

TRIVIA 40 STAFF SECTION:

REGISTRATION CLERK INITIALS: |____|____|____|

DATE REGISTERED: ____/____/10

COMPUTER OPERATOR INITIALS: |____|____|____|

ENTERED DATE: ____/____/10

COMMENTS:

REGISTRATION FEE
CHECK ONE

PAID $15.00 |____|

PAID $30.00 |____|

FREE |____|