



SCHOOL NAME	
NOMINATING TEACHER	
CONTACT PHONE	
CONTACT EMAIL	
ADDRESS OF SCHOOL	

Please complete the information below if the participating students have been identified, otherwise, please write in TBA. Names of students, registration forms and payment must be received before 31st March 2010.

STUDENT INFORMATION (STUDENTS MUST BE 13 – 17 YEARS)		
Name		Date of Birth:
Year		Gender:

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Name		Date of Birth:
Year		Gender:

1. Only 5 school teams will be eligible to enter each competition
2. Registration will only be finalised on receipt of nominated names of students for each team and payment of 50% per student (\$375), balance to be paid before 30th April 2010.
3. Each student will be required to complete individual application and consent form
4. The school agrees that their school name may be used in any publicity about the competition.

Employee's signature:.....

Please email completed form to info@tucker.co.nz,
 Fax to 402 8431 or post to P.O. Box 42, Opua 0241.