



# Registration Information

## Goshen College Science Olympiad Regional Tournament

This completed form must be submitted at registration on **February 3, 2024**.

School: \_\_\_\_\_ Coach: \_\_\_\_\_

	Student name	Grade*	Email**	Phone**
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

\*Division B teams are limited to **five (5) ninth-grade students**. Division C teams are limited to **seven (7) twelfth-grade students**.

\*\*This information is needed to verify eligibility for a Science Olympiad Goshen College scholarship. A link to pictures taken during the competition will be emailed, and Goshen College may email information about its academic programs.

### Alternates:

	Student name	Grade*	Email**	Phone**
1				
2				
3				
4				
5				

If an alternate will compete instead of a team member, the substitution must be announced at the registration desk.

I certify that all of the team and alternate students are active members of our school and grade levels are appropriately indicated.

\_\_\_\_\_  
**Principal's signature**