2020

Central Region Competition—April 08, 2020 Team Member Information Form

Information Deadline—March 18, 2020

(Please Print or Type)

List of team members names, shirt sizes, gender, race and grade need to be submitted 3 weeks prior (March 18^{th}) to the competition date (April 8^{th}). Team Name: _______ County: Team School, Club or Organization: **List of Team Members Please Print or Type** |Shirt Size| Gender |Grade | Name Race Captain Alternate Anyone needing special accommodations or having special needs, please list name and need here: Note: 1 Alternate must be listed and will be the only person allowed to replace a team member without approval. If more than one replacement is needed, this must be presented to the Committee (Tina Dulaban--Chairperson) and approval made by the committee 1 week prior to the event. **Please Print** _____ Cell Phone #: _____ Team Advisor: Date: _____ Team Advisor Signature:

Please email completed list to <u>tina.dulaban@swcd.mo.gov</u> by March 18th.