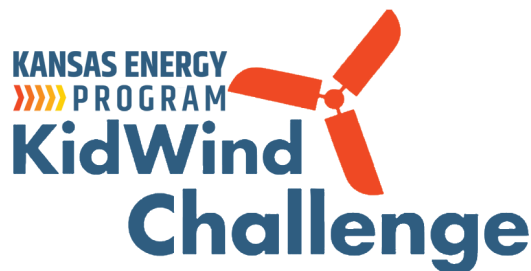


# Team Information Form

## 2023 Regional Challenges



Email filled copy for each team to:

[evie@ksu.edu](mailto:evie@ksu.edu) or [ksenergyprog@ksu.edu](mailto:ksenergyprog@ksu.edu)

**Information due by Midnight 3 weeks before event**

Primary Coach: \_\_\_\_\_ Secondary Coach: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Regional Event (check one):  SW—Dodge City (2/14)  NE—Overland Park (2/21)  NC—Manhattan (2/28)  
 NW—Oakley (2/16)  SC—Hutchinson (2/23)  SE—Burlington (3/3)

School Name: \_\_\_\_\_ Team Name: \_\_\_\_\_

### Student 1 Information:

First and Last Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Photo Release:  Food Allergies: \_\_\_\_\_

### Student 2 Information:

First and Last Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Photo Release:  Food Allergies: \_\_\_\_\_

### Student 3 Information:

First and Last Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Photo Release:  Food Allergies: \_\_\_\_\_

### Student 4 Information:

First and Last Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Photo Release:  Food Allergies: \_\_\_\_\_

### Student 5 Information:

First and Last Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Photo Release:  Food Allergies: \_\_\_\_\_

Photo Release Forms due day of event. Printed and Fillable PDF versions available.

**Check box if included in email with this form.**