**School and Team Registration**

**Idaho Envirothon 2024**

**All forms & Payment must be submitted by March 1, 2024**

($75 late fee after the March 1st)

Checklist of Required Forms

* **School /Team Registration**
* **Parental Consent**
* **Medical Information**
* **Code Of Conduct**

**High School Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Address:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Advisor 1:** Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Advisor 2:** Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Team members / Alternates and Advisors**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Position** | **Gender** | **Grade** | **T-Shirt Size** |
|  | Captain |  |  |  |
|  | Member |  |  |  |
|  | Member |  |  |  |
|  | Member |  |  |  |
|  | Member |  |  |  |
|  | Advisor |  |  |  |
|  | Advisor |  |  |  |
|  | Alternate |  |  |  |
|  | Alternate |  |  |  |

**Please contact a Envirothon Committee member prior to the Competition if you have any team member changes.**

**Payment information on page 2**

**Payment Information**

Team and Advisors

Registration: $400.00

Alternates: $100.00 / each

Late fee $75.00

Total Registration $\_\_\_\_\_\_\_\_\_\_\_

Make checks payable to: IASCD Idaho Envirothon

Att. Staci Tripp

PO Box 249

Malad City, Id. 83252

For IASCD Committee use only

Total Due:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Paid:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

District Sponsor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_