## 2024 Regional Teacher Worksheet to enter

## Teams of 2-4 Secondary competitors to the Skills BC website.

## Please recycle (throw this away) after registration is done.

Teacher 6	email address <sub>.</sub>	School Name	
Attendee	: 1 = Team 1	QTY=Quantity of teams you wish to enter	
1. First ar	nd last name _		
Р	arent email		
В	BC Personal Ed	ucation number (9 digits)	
0	Date of Birth _		
		ct waiver covers all risks associated with this event and allows photos be used. Yes/No	and videos of the
	he Skills BC Reubmitted.	egional release (available online and by email) will be sent to the pare	nt/guardian, signed and
Δ	dult t-shirt siz	e	
2. First and last name			
Р	arent email		
В	C Personal Ed	ucation number (9 digits)	
C	Date of Birth _		
		ct waiver covers all risks associated with this event and allows photos be used. Yes/No	and videos of the
	he Skills BC Reubmitted.	egional release (available online and by email) will be sent to the pare	nt/guardian, signed and
Д	dult t-shirt siz	e	
3. First ar	nd last name _		
Р	arent email		
В	C Personal Ed	ucation number (9 digits)	
	Date of Birth _		
		ct waiver covers all risks associated with this event and allows photos be used. Yes/No	and videos of the
	he Skills BC Reubmitted.	egional release (available online and by email) will be sent to the pare	nt/guardian, signed and
Δ	dult t-shirt siz	e	

4. First and last name	
Parent email	
BC Personal Education number (9 digits)	
Date of Birth	
A School District waiver covers all risks associated with this event and allows photos and videos of the competitor to be used. Yes/No	
The Skills BC Regional release (available online and by email) will be sent to the parent/guardian, signed and submitted.	d
Adult t-shirt size	