



## CHAPTER COMPETITOR INFORMATION SHEET

*Coach: Please complete and return this form 4 weeks prior to the competition to Nikki Johnsrud, Chapter Coordinator, [nikki.johnsrud@k12.nd.us](mailto:nikki.johnsrud@k12.nd.us). Please print or type the student information on this form exactly as it should appear on the participation certificates.*

School Name \_\_\_\_\_ School Phone \_\_\_\_\_

Street Address \_\_\_\_\_ City, State & ZIP \_\_\_\_\_

Coach Name \_\_\_\_\_ Mobile Phone \_\_\_\_\_ Coach Email \_\_\_\_\_

### TEAM MEMBERS (TMs)

TM #1 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

TM #2 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

TM #3 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

TM #4 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

### INDIVIDUAL PARTICIPANTS (INDs)

IND #1 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

IND #2 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

IND #3 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

IND #4 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

IND #5 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

IND #6 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

IND #7 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

IND #8 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

IND #9 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

IND #10 \_\_\_\_\_ Grade: ☐6 ☐7 ☐8 Gender: ☐Male ☐Female ☐Other

*I certify the above named students are enrolled as full time students in grades 6-8 at the school named above. The students and school meet the eligibility requirements of the MATHCOUNTS Competition Series according to the Eligibility Requirements section of the MATHCOUNTS School Handbook.*

\_\_\_\_\_  
Signature - MATHCOUNTS School Coach

\_\_\_\_\_  
Date