**Year 7 Quadkids Championships**

**ATHLETE REGISTRATION FORM**

**School Name:**

**Teacher:**

Team Details

|  |  |  |
| --- | --- | --- |
|  | BOYS |  |
| Boy |  | Boy |
| **Boy** |  | **Boy** |
| **Boy** |  | **Boy** |
| **Boy** |  | **Boy** |
| **Boy** |  | **Boy** |
|  | GIRLS |  |
| Girl |  | Girl |
| Girl |  | Girl |
| Girl |  | Girl |
| Girl |  | Girl |
| Girl |  | Girl |

I will allocate an identification number for each of your athletes - these will be provided for you on the day.

If you are entering multiple teams, please use a new form each time.