

**INDIANA JUNIOR ACADEMY OF SCIENCE  
PROBLEM SOLVING EXAM  
DELEGATE REGISTRATION FORM**

**Deadline: October 3, 2011 (received by)**

\*\*Please type or print neatly\*\*

**Delegate #1**

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_ Grade: \_\_\_\_\_

Home Phone#: \_\_\_\_\_

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

Name of  
Parent/Guardian: \_\_\_\_\_

**Delegate #2**

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_ Grade: \_\_\_\_\_

Home Phone#: \_\_\_\_\_

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

Name of  
Parent/Guardian: \_\_\_\_\_

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School: \_\_\_\_\_

Sponsoring Teacher: \_\_\_\_\_