

# Registration Form:

## Overview

We welcome and invite you to join us for this fun event. Each school is responsible for securing the necessary consent forms from parents or guardians of minors participating in the BKB4. Schools and/or Organizations are also responsible for their own transportation to and from the event. Free parking is available. **Please make a copy of this registration form for your records and mail the original to:**  
Diane Robinson, Community Relations Manager • SDC • 4041 N. Richards Street, • Milwaukee, WI 53212 • P: 414.906.2804 • F: 414.906.2719

## Registration

- Yes, please register my team to participate in the BKB4, on Friday, March 30, 2012**  
**I understand that my \$20 Team Registration Fee includes:**
- registration for one team of 3 to 5 participants
  - breakfast & lunch
  - one t-shirt for each participant

\* Please note: Study guides will be mailed to you when payment is received. Extra copies of the Study Guides may be purchased for \$10 each.

## Payment Method

- Please accept my check made payable to the **SD Foundation** for \$ \_\_\_\_\_
- Please process my credit card: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Credit card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ Card Holder Signature \_\_\_\_\_  
Type of card:  Mastercard  Visa  Discover  American Express

- I have submitted my Team Registration Fee via the SDC website.

## Contact Information

**Please indicate:**  Teacher  Parent / Coach  Organization Leader

School/Organization: \_\_\_\_\_

School/Organization Address: \_\_\_\_\_

Principal's Name (if applicable): \_\_\_\_\_ Name of Team's Teacher/Parent/Coach: \_\_\_\_\_

Office Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

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

	Team Member's Name	Grade	T-shirt Size
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

*Talent Release - Sometimes we film and we always take photos of the event to share with others. Please read and sign below:  
I, the undersigned, hereby grant the SDC and SDF permission to take photographs, video, publish text, letters, testimonials from the BKB4 team participants and publish as they deem appropriate. I am the parent, guardian, teacher or team leader for this team and hereby consent to the above release.*

Print Name

Signature

Today's Date

**Visit us on-line at: <http://www.cr-sdc.org/bkb4.htm>**

Remember: The sooner you register, the sooner your team can begin to study.

