

Team Roster

University of Southern Indiana Regional Science Olympiad

Please complete and return this form into the registration desk on February 10, 2024.

School: _____ Coach: _____

	<i>Student Name</i>	<i>Grade*</i>	<i>Email**</i>	<i>Phone**</i>
1				
2				
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15				

*Division B teams are limited to five (5) ninth-grade students. Division C teams are limited to seven (7) twelfth-grade students.

**This information appreciated, but optional.

Alternates:

	<i>Student Name</i>	<i>Grade*</i>	<i>Email**</i>	<i>Phone**</i>
1				
2				
3				
4				
5				

If an alternate will compete instead of a team member, the substitution must be announced at the registration desk.

I certify that all of the team and alternate students are active members of our school and grade levels are appropriately indicated.

 Coach signature

