SOLVED BY GIRLS REGISTRATION FORM:

Coach's Name	School Name
School Address	
Coach Contact Number	
Coach Email	
Number of teams:	
Each team must be 4 members.	
Number of Elementary team (Grades 3-5):	
Number of Middle School team (Grades 6-8):	





TEAM SYNERGY ★ INFINITY AWARD ★ YOUNG VISIONARIES AWARD

PINNACLE AWARD ★ VANGUARD AWARD

Registration Fee: \$100 per team.
For every 2 teams, a school must provide a volunteer.
Maximum 4 teams per school.

Title I schools are entitled to a 50% registration discount.

If you are unsure if your school is a Title I school, please consult your principal.

LOCATION:

Primoris Academy

120 Washington Avenue, Westwood, NJ 07675

SUBMIT REGISTRATION FORM BY:

1. Email: sbg@primorisacademy.org

2. Mail: 120 Washington Avenue, Westwood, NJ 07675 (Attn: Main Office, 2nd Floor)
For any questions, please call 201-722-1000

Please note: all documentation must be submitted together to complete registration.



Parental Consent and Media & Medical Release Form

Please complete this form for each participant. Without this consent form, your child may not participate.

Name		Age		
Home Address				
City	State	Zip Code		
Home Phone Number	Alternate Phone Nu			
Emergency Phone Number		Parent Email Address		
Insurance Company	Policy Number			
Allergies/ Health Concerns				
Is your child under the care of a	physician? If so, pleas	se provide pertinent information.		
Is your child taking prescription	medication? Please l	ist and explain.		

Please list any over-the-counter medications you do not wish dispensed to your child.

The person listed on this form will be attending the Solved By Girls STEM conference hosted by Primoris Academy, located at 120 Washington Ave, Westwood, NJ 07675.

We/I the parent(s) or guardian(s), of the individual listed, and on behalf of personal representatives and our/my heirs, hereby voluntarily agree to release, waive, forever

discharge, hold harmless, defend and indemnify Solved By Girls, Primoris Academy, and their agents, officers, boards, volunteers, employees, and affiliates from any and all liability and all claims, actions, or losses for bodily injury, property damage, wrongful death, loss of services, or otherwise which may arise out of my participation in activities related to the Solved By Girls conference, including travel to and from the event.

Furthermore, we/I are/am the parent(s) or legal guardian(s) of this participant and hereby grant permission for her to participate fully in the tournament, and hereby give permission to take her to a doctor or hospital and authorize medical treatment including, but not limited to, emergency surgery, tests, medications, or x-rays. We/I understand that if medical treatment is required we/I will be contacted as soon as possible. Should it be necessary for our/my child to be sent home for medical reasons, disciplinary reasons, or otherwise, we/I hereby assume all costs.

We/I hereby grant permission for Solved By Girls and the event host to publish images, video, and articles of the event's activities and of this participant for the purpose of promoting Solved By Girls. This consent includes the use of my child's likeness, voice, statements, and name. We/I grant this permission freely without reservation. We/I release Solved By Girls, the event host, as well as their staff volunteers, and affiliates, from all claims, demands, and liabilities whatsoever in connection with the above. We/I understand that Solved By Girls has no control over media use of photographs, audio, video, or statements that are taken without permission.

Signature of Participant	Printed Name	Date
Signature of Mother or Guardian	Printed Name	Date
Signature of Father or Guardian	Printed Name	Date
School Name	Coach Name	