

Campus Challenge

Individual Registration

Please type or print clearly!

Please complete entire form. Incomplete forms will be returned.

Name: _____ Birth Date (mm/dd/yyyy): ____/____/____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Phone: (____) _____ E-mail: _____

High School: _____ Graduation Year: _____

Local Wesleyan Church: _____ City: _____

Select your age level on the date of the competition: Junior (12-15yrs) Senior (16-19 yrs)

Select the categories you are entering (you may enter multiple categories):

Vocal	Instrumental	Performing Arts	Completed Achievements	Speech
<input type="checkbox"/> Male Solo	<input type="checkbox"/> Keyboard Solo	<input type="checkbox"/> Object Lesson	<input type="checkbox"/> Art	<input type="checkbox"/> Standard Oration
<input type="checkbox"/> Female Solo	<input type="checkbox"/> Instrumental Solo	<input type="checkbox"/> Dramatic Presentation Solo	<input type="checkbox"/> Literature Composition	<input type="checkbox"/> Original Oration
		<input type="checkbox"/> Puppetry Solo	<input type="checkbox"/> Music Composition	
			<input type="checkbox"/> Photography	
			<input type="checkbox"/> Videography	

Special setup needs:

Registration Fee:

of entries _____ X _____ (Registration Fee) = \$ _____

Make check out to **Campus Challenge**.

Please send this completed form with your registration fee to the address of your area.