



Scripps National Spelling Bee

School Champion Registration Form

School Champion First Name: _____

School Champion Last Name: _____

School Name _____

School Address _____

Spelling Bee Contact Person at School: _____

Birth Date: _____

Current Age: _____

2017 - 2018 Grade Level: _____

Gender: _____

Home Address: _____

Home City: _____

Home State: _____

Home Zip Code: _____

Name of Parent/Guardian 1: _____

Name of Parent/Guardian 2: _____

Primary Home Phone Number for Parent/Guardian 1: _____

Primary Cell Phone Number for Parent/Guardian 1: _____

Primary Home Phone Number for Parent/Guardian 2: _____

Primary Cell Phone Number for Parent/Guardian 2: _____

Parent/Guardian 1 Email Address: _____

Parent/Guardian 2 Email Address: _____

Winning Word: _____