

# 2007 FM BIBLE QUIZ FINALS

## Roberts Wesleyan College - June 25-29, 2007

### Team Registration Form

Church: \_\_\_\_\_ City/State: \_\_\_\_\_

Head Coach: \_\_\_\_\_ Phone: \_\_\_\_\_

Team 1 Name: \_\_\_\_\_

Check appropriate division: <input type="checkbox"/> S <input type="checkbox"/> ST <input type="checkbox"/> ST <input type="checkbox"/> ST <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> V <input type="checkbox"/> V <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> V <input type="checkbox"/> V <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> B	Grade '06-07	Years Quizzed (including '06-07)
Quizzer's names:		
1		
2		
3		
4		
5		
Coach:		

Team 2 Name: \_\_\_\_\_

Check appropriate division: <input type="checkbox"/> S <input type="checkbox"/> ST <input type="checkbox"/> ST <input type="checkbox"/> ST <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> V <input type="checkbox"/> V <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> V <input type="checkbox"/> V <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> B	Grade '06-07	Years Quizzed (including '06-07)
Quizzer's names:		
1		
2		
3		
4		
5		
Coach:		

Team 3 Name: \_\_\_\_\_

Check appropriate division: <input type="checkbox"/> S <input type="checkbox"/> ST <input type="checkbox"/> ST <input type="checkbox"/> ST <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> V <input type="checkbox"/> V <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> V <input type="checkbox"/> V <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> B	Grade '06-07	Years Quizzed (including '06-07)
Quizzer's names:		
1		
2		
3		
4		
5		
Coach:		

Team 4 Name: \_\_\_\_\_

Check appropriate division: <input type="checkbox"/> S <input type="checkbox"/> ST <input type="checkbox"/> ST <input type="checkbox"/> ST <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> T <input type="checkbox"/> V <input type="checkbox"/> V <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> V <input type="checkbox"/> V <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> B	Grade '06-07	Years Quizzed (including '06-07)
Quizzer's names:		
1		
2		
3		
4		
5		
Coach:		

How many sets of **WORKING Quiz Seats** will you bring? \_\_\_\_\_  
 (Please bring your broken sets; we will have electricians repairing sets throughout this event.)

**Coach's Statement:** By signing this statement, I certify that the above information is correct and accurate, and that the teams above are placed in their proper division.

Coach's Name: \_\_\_\_\_

Signature: \_\_\_\_\_