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# Registration Form

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| Participant Details |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Participant Name: |  | Birth Date: |  | Age: |  | |
| |  |  | | --- | --- | | School Name: |  | |
| |  |  |  |  | | --- | --- | --- | --- | | Classification/grade: |  | Phone Number: | ( ) | |
| |  |  | | --- | --- | | Email address: |  | | Career goals/ sports: |  | |

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| Please list three answers for each question. |
| |  |  | | --- | --- | | Question: | List 3 strengths concerning your academic year, social life or fiscal (money) knowledge: | | Response: |  | |  |  | | Question: | List 3 weaknesses concerning your academic year, social life or fiscal (money) knowledge: | | Response: |  | |  |  | | Question: | Tell us anything else that is important for us to know about you: | | Response: |  | |

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| Additional Requirement |
| Please provide a colored (chest up) photo with your completed forms. Email all documents to:  **stepupla4ym@gmail.com** |