

Bank for Education KeikiCo School Participation Entry Form



Name of School: _____

	Elementary	Middle	High School
Division(s) Competing In:	<input type="checkbox"/> Grade 3 - 5	<input type="checkbox"/> Grade 6 - 8	<input type="checkbox"/> Grade 9 - 12

Student Population in Competing Division: Grade 3 - 5 _____ Grade 6 - 8 _____ Grade 9 - 12 _____

Estimated Students Participating: Grade 3 - 5 _____ Grade 6 - 8 _____ Grade 9 - 12 _____

Estimated Teams Participating: Grade 3 - 5 _____ Grade 6 - 8 _____ Grade 9 - 12 _____

1. If your school wins one of the prizes, what will you do with the money?

2. How will you get the parents involved in this contest?

Please provide the following information. Use a separate sheet if more space is needed.

Team	Teacher / Advisor	Division	Email / Phone Number
1			
2			
3			
4			
5			

You certify that the information provided above is true and correct to the best of your knowledge.

Submitted by (print name/title): _____

Signature: _____ Date: _____