

Competition Registration Form

Participant Information

Registrant(s): _____

Name of representative if Registrant is not an individual: _____

Address: _____

Email: _____

Phone Number: _____

Organization/Affiliation (if any): _____

Role/Title: _____

☐ Individual Entry ☐ Team Entry

Team name: _____

Team Members (Name and Role):

How did you hear about the competition? _____

Agreement

☐ I agree that I am the competition registrant or, if the registrant is not an individual, that I have authority to sign on behalf of the competition registrant. I represent that I meet the eligibility

requirements of the competition. I agree that I have read, understand and agree to all of the terms and conditions outlined in the Design Brief on the design competition website.

Signature: _____ Date: _____

Printed Name of Signatory: _____