

SCIENCE OLYMPIAD EMERGENCY CONTACT SHEET

(Turn in this form at the registration desk on the morning of the competition)

TEAM NUMBER: _____

SCHOOL _____

TEACHER NAME _____

TEACHER CELL PHONE _____ Do you accept text messages? YES or NO

Please list all adults/chaperones who are attending trip and cell phone numbers. This form will be given to the Help Desk and used if there is an emergency or other important information is needed to be distributed.

Name of Adult/Chaperone	Cell Phone Number	Accept Text Messages (YES or NO)