

Official AIHEC Math Bowl Roster Registration Form

This form shall be submitted by: March 13, 2020

Submit the form to: Eva LeBron (eva.riveralebron@bie.edu)

Team Coach (Main Contact Person For Team) _____

Name of School: _____

Address: _____

Telephone number and e-mail: _____

Team Captain

Name: _____

Address: _____

Telephone: _____

City, State, Zip: _____

Email: _____

Tribal Affiliation: _____

Member 2

Name: _____

Address: _____

Telephone: _____

City, State, Zip: _____

Email: _____

Tribal Affiliation: _____

Member 3

Name: _____

Address: _____

Telephone: _____

City, State, Zip: _____

Email: _____

Tribal Affiliation: _____

I certify that the Tribal College participants listed on the roster meet all eligibility guidelines of the American Indian Higher Education Consortium (AIHEC) and are eligible to participate in the AIHEC Student Conference.

Signature – Math Bowl Point of Contact

Date