



CONTESTANT CERTIFICATION FORM

SELECT ONE	
☐ CHAMPION	☐ ALTERNATE

March 28, 2007 ~ Solano County Office of Education

5100 Business Center Drive, Fairfield, CA 94534 Registration: 5:15 p.m. to 5:30 p.m.

Registration Form(s) Due by Friday, March 9, 2007

STUDENT PERSONAL INFO	Grade:	П5 П6
Note: Pronunciatio	is required to minimize embarrassment to the student and family. Please be clear.	
Street:	City/Zip:	
Phone: ()	E-mail (optional):	
STUDENT'S SCHOOL INFOR	MATION:	
School:		
Address:	City/Zip:	
Phone: ()	Fax:(
Principal's Name:	Email:	
District:		
NEAREST NEWSPAPER TO	HE STUDENT IS:	
Newspaper:	Contact:	
Address:	City/Zip:	
Phone: ()	Fax:(
Email:		
CERTIFIED BY: This student has been certified to Solano County Office of Education	articipate in the Solano County Spelling Bee Championship on Wednesday, March , Fairfield, California.	28, 2007 at
Name:	Signature:	
	Date:	

Submit original no later than Friday, March 9, 2007 to:

Solano County Spelling Bee Ken Scarberry, Spelling Bee Director <u>kscarberry@solanocoe.net</u> or <u>bkross@solanocoe.net</u> For General Information

Telephone: (707) 438-3674 Fax: (707) 438-2667



PARENT CONSENT

FOR STUDENT PARTICIPATION & CONSENT FOR RELEASE OF PUBLICATION

DUE BY FRIDAY, March 9, 2007

Student's Name:	
Date of Birth: / / Gender: Male	☐ Female Grade: ☐ 4 ☐ 5 ☐ 6
Street: City/Zij	p:
Phone:(SN*:
Email (optional):	
* Social Security Number is needed to purchase a savings bond in the Bee. In the past, acquiring a social security number at the competition	
School attending:	
As the parent or guardian of the above-named student, I hereby allow Spelling Bee to be held on Wednesday, March 28, 2007, at the Solan follow the rules of competition and accept the interpretations and decisions.	o County Office of Education. My child will agree to
By signing this agreement, this student and parent/guardian expression of educational information about or relative to the participation of this shall include but not be limited to the release of photographs, event videotape recordings, etc.	student in competition day activities. Such information
Consent is likewise given to the use of such information by any insgroup or educator for the purposes of study, comparison, and further behavior. The Solano County Office of Education shall have the rigmanner as they see fit, without obligation of any kind to any person, the	rance of knowledge in the fields of education or human ht to reproduce, use, display, and disseminate in such
By signing this agreement, I agree to release the Solano County Offic any and all claims, demands and actions of any kind which I may I regard to the publication of media.	
Parent's/Guardian's Signature	Date
Print Parent's/Guardian's Name from above	Relation to Speller
This Agreement must be retu	urned before the student can compete. Submit to:



Solano County Office of Education Spelling Bee Director

Spelling Bee Director Tel: 707-438-3674 4522 Abernathy Road, Fairfield, CA 94534 FAX: 707-438-2667

Email: <u>kscarberry@solanocoe.net</u> or <u>bkross@solanocoe.net</u>