



UNB 2017 Brain Bee Registration

Monday, April 10th 9am-4pm

Please fill out the information below and email the completed form to newbrunswick@brainbee.ca. If you do not have access to a scanner, you may take a photo of the completed registration form and email your photo as long as the information is legible. To guarantee your spot in this year's event, please return this form by April 5th, 2017.

Full Name _____

Email Address _____

Date of Birth _____

High School _____

Grade _____

Do you have any food allergies (please specify)?

Do you have any medical conditions/ accessibility accommodations we should be aware of?

Will you be bringing any guests on the day of the event? (Please indicate how many)

Throughout the day, the UNB Brain Bee committee will be taking photographs of students as they compete in the event, and as they take part in the planned activities. These photographs may eventually appear on our Brain Bee Website (www.brainbee.ca), as well as our facebook, twitter, and other social media pages.

By signing below, I grant my child permission to participate in the Brain Bee.

Signature of Parent/ Guardian _____ Date _____

Participant's Signature _____ Date _____