

# ALTERNATE COMPETITOR FORM



Fill in and hand to the judge at competition time.

Event: \_\_\_\_\_

Teacher Leader: \_\_\_\_\_ Region: \_\_\_\_\_

School: \_\_\_\_\_ City: \_\_\_\_\_

Competitor: \_\_\_\_\_

Alternate: \_\_\_\_\_

Review Competitive Events Frequently Asked Questions for Alternates information.

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