

CHAPTER NAME:

JUDGES



I certify that the following Advisors/Adults, who will be in attendance and are approved by me, have volunteered to serve as a judge during the Michigan Qualifier for the Heartland Ritual Tournament of Champions. Mark the appropriate selection "YES" if the individual is willing to serve as a Panel Chairman, Word Judge, Floor Work Judge, and/or a Performance Judge

	Name	Email Address	Phone Number	Chapter	Panel Chairman	Word Judge	Floor Work Judge	Performance Judge
			( )					
			( )					
RD			( )					
REQUIRED			( )					
REC			( )					
NO			( )					
INFORMATION			( )					
ORN			( )					
INF			( )					
ALL			( )					
			( )					
PRINT			( )					
ASE			( )					
PLEASE			( )					
			( )					
			( )					

ADVISOR CERTIFICATION:	
"CHAPTER ADVISOR" NAME: (PRIN	T) "CHAPTER ADVISOR" SIGNATURE:

This "JUDGE" Registration Form is to be completed and submitted NO LATER THAN November 18, 2017

<u>Send this completed form to:</u> Dad Dave Fulmer 25125 Stanford Street Dearborn Heights, MI 48125-1621

or by email: Grumpe128@aol.com