

The W. J. Blundon Mathematics Contest

Registration Form **To be Completed by Principal or Supervising Teacher**

A completed copy of this form must be received no later than February 15, 2024. Please send completed forms via email to:

Carolyn Evans
MUN)

carolyne@mun.ca

(Dept Math & Stats,

Please indicate Subject: BLUNDON CONTEST registration

Please type or print legibly

1. Student's Name in Full _____

2. Student's Home Address _____

Phone # _____ Postal Code _____

3. Student's Age _____ Male/Female? _____ Grade in School _____

4. Supervising Teacher _____

5. Principal's Name _____

6. Name of School _____

7. School Address _____

Phone # _____ Postal Code _____

8. Canadian Citizen _____ Permanent Resident _____ Other (specify) _____

*I agree to arrange for supervision of the three-hour contest, to be written on Tuesday, **February 28, 2024.***

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Signed _____
Principal or Teacher