



**Area 2 & Ohio Envirothon Registration Form (two sided)**

***Area 2 Envirothon hosted by Richland County, April 9<sup>th</sup>***

***Location: Cooke Family Wildlife Conservation Park, 4774 OH-13, Shiloh OH 44878***

***Submit all forms to ASHTABULA SWCD before the deadline of March 05, 2025***



**Please type neatly. All team members, alternates and advisors must submit release forms included with registration. Please write your County: \_\_\_\_\_**

Team Name: \_\_\_\_\_

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

School Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

<u>Name</u>	<u>M/F</u>	<u>Grade Level</u>	<u>T-shirt size</u>
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Team Captain: \_\_\_\_\_

Team Member: \_\_\_\_\_

Team Member: \_\_\_\_\_

Team Member: \_\_\_\_\_

Team Member: \_\_\_\_\_

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

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

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

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

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

**Only registered team members or alternates with signed release forms may participate in the Area or Ohio Envirothon. Alternate team members must be pre-registered, but may attend the Envirothon ONLY if substituting for a registered team member who is unable to participate.**

**Advisor 1 Name:** \_\_\_\_\_ M / F: \_\_\_\_\_ T-shirt size: \_\_\_\_\_

Summer address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Advisor Participate in Envirothon competition \_\_\_\_\_ yes \_\_\_\_\_ no

**Advisor 2 Name:** \_\_\_\_\_ M / F: \_\_\_\_\_ T-shirt size: \_\_\_\_\_

Summer address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Advisor Participate in Envirothon competition \_\_\_\_\_ yes \_\_\_\_\_ no

**NOTE: All teams must be registered to Ashtabula SWCD by March 05, 2025 by 4:30 pm. Mail to Ashtabula SWCD, 39 Wall Street, Jefferson, OH 44047 or email – scan all documents to Suzanne Westlake [ashtabulaswcd@gmail.com](mailto:ashtabulaswcd@gmail.com). All information and forms can be found online at <https://richlandswcd.net/residential/programs/>**

**Please note medical, dietary or other restrictions of which we should be aware.**

**Please select one:**

Team will be staying for lunch  YES  NO

Please note any mobility or medical issues, food preferences (i.e. vegan, vegetarian, etc.) or dietary restrictions. We will try to accommodate these as much as possible.

<b>Name</b>	<b>Comments</b>
_____	_____ _____ _____ _____ _____
_____	_____ _____ _____ _____ _____
_____	_____ _____ _____ _____ _____
_____	_____ _____ _____ _____ _____
_____	_____ _____ _____ _____ _____