

TAKE THE



**CNA-Q SKILLS
COMPETITION**

MARCH 25, 2019
OPEN TO ALL CNA-Q
STUDENTS

CHALLENGE

**BUSINESS
STUDIES**

**ENGINEERING
TECHNOLOGY/TCP**

**HEALTH
SCIENCES**

**INFORMATION
TECHNOLOGY**

**LANGUAGE STUDIES
AND ACADEMICS**

COMPETITION REGISTRATION FORM

CONTACT INFORMATION:

Name: _____

(Please print clearly - this is how your name will look on your certificate)

School: _____

Program: _____

Student Number: _____

Mobile #: _____

Sponsor *(if applicable)*: _____

Name of Competition: _____

May we take your picture during the competition? Yes No

STUDENT DECLARATION:

I wish to participate in the CNA-Q 2019 Skills Competition. I agree to abide by all rules and regulations of the contest and agree to follow all safety requirements. I acknowledge that photos may be taken and used by CNA-Q Marketing and Public Relations and that I should tell my competition instructor if I do not want to be in photos.

Signature: _____

Date: _____