



November 1, 2016 - May 1, 2017

REGISTRATION FORM

PARTICIPANT DETAILS:

School: _____

Address: _____

Category: _____

Contact Person: _____

Phone: _____

Email: _____

ACKNOWLEDGEMENT

I hereby declare that all the above information that I have provided is true and accurate. I understand that any false or misleading information may result in my application being void. I hereby agree to abide by all rules and regulations set by the organizers concerning The Vision Competition and that the school entry will be done by the registered participants in school and no help will be extended to them.

Name

Signature

Date
