



SkillsUSATM

CHAMPIONSHIPS

CONFIRMATION FORM

Please Print or Type

Name _____

Company _____

Address _____

City _____ State _____ Zip _____

Phone, Fax, Email: (___ - ___ - _____) (___ - ___ - _____) _____ @ _____

Contest Area _____

- Yes, I will be able to judge in a skill contest.
 No, I will not be able to judge at this time.
 Since I cannot attend, above is the name and contact information of my replacement or recommendation for a SkillsUSA Championships judge.

- Yes, I will be able to assist in developing the contest.
 No, I will not be able to assist in developing the contest at this time.

- Yes, I will be able to donate prizes for the contest.
 No, I will not be able donate prizes the contest at this time.

- Yes, I will be able to supply some materials.
 No, I will not be able to supply materials.

Phone: 225.452.0330

Cell: 225.603.5664

Website Registration: <http://www.skillsusala.org/judge--guest-sign-in.html>

Email: skillsusala@yahoo.com