

# 2020 Contig Participants

School Name: \_\_\_\_\_ School Phone #: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone # (if not same): \_\_\_\_\_

Chaperone(s): \_\_\_\_\_

(Should stay with students)

**Please PRINT or TYPE each student's First and Last Name in the appropriate category. Seat will be assigned by our office.**

| 4 <sup>th</sup> Grade | Seat | 5 <sup>th</sup> Grade | Seat | 6 <sup>th</sup> Grade | Seat |
|-----------------------|------|-----------------------|------|-----------------------|------|
|                       |      |                       |      |                       |      |
|                       |      |                       |      |                       |      |
|                       |      |                       |      |                       |      |
|                       |      |                       |      |                       |      |
|                       |      |                       |      |                       |      |
|                       |      |                       |      |                       |      |
| EX: John Smith        |      |                       |      |                       |      |

**Alternate(s):**

|  |  |  |
|--|--|--|
|  |  |  |
|--|--|--|

**Return this completed form by one of the following methods by April 1, 2020:**

School mail, US Mail, or email:

**Jewel Grady**

[contig@roe39.k12.il.us](mailto:contig@roe39.k12.il.us)

[jgrady@dps61.org](mailto:jgrady@dps61.org)

Macon-Piatt ROE 1690 Huston Dr.

Decatur, IL 62526

**NO names will be taken over the phone.**

**Please do not fax this form as we are on a tight budget. Thank you.**