

BLAST REGISTRATION FORM (if not registered on-line for district level)

Please complete this form and return to your district **BLAST** coordinator

Please check one: Participant Spectator Adult Sponsor

NAME: _____ **EMAIL:** _____

ADDRESS: _____ **PHONE:** _____

CITY: _____ **STATE:** _____ **ZIP:** _____

DATE OF BIRTH: __/__/__ **GRADE (2008-2009):** _____ **GENDER:** MALE FEMALE

T-SHIRT SIZE: S M L XL XX XXX (for district and/or regional event)

COMPETITION LEVEL: EARLY YOUTH SENIOR YOUTH

LOCAL CHURCH (city and name): _____

DISTRICT: CO EO EKY NCO NWO SWO WVN WVS

FOR PARTICIPANTS:

Christian Communication

(limit 3 entries excluding Impact team)

Vocal Music

- ___ Vocal Solo
- ___ Vocal Duet (group name: _____)
- ___ Vocal Ensemble (3-9) (group name: _____)
- ___ Vocal Choir (10+) (group name: _____)
- ___ Impact Team
- ___ Praise Band (group name: _____)
- ___ Christian Band (group name: _____)

Instrumental Music

- ___ Instrumental Solo
- ___ Instrumental Ensemble (group name: _____)
- ___ Keyboard Solo

Writing

- ___ Poetry
- ___ Prose

Creative Ministries

- ___ Drama
- ___ Human Video[___ solo ___ (2-4) ___ (5+)]
(group name: _____)
- ___ Preaching
- ___ Puppets
- ___ Sign Language[___ solo ___ (2-4) ___ (5+)]
(group name: _____)

Arts & Crafts

(limit 2 entries)

- ___ Crafts
- ___ Digital Assist. Photo.
- ___ Drawing
- ___ Painting
- ___ Photography
- ___ Videography

Math

- ___ Mathematics

Athletic/Tournament Events

- ___ 5 K Run
- ___ Basketball Hotshot
- ___ Basketball (team name: _____)
- ___ Benchpress
- ___ Chess
- ___ Soccer Team (team name: _____)
- ___ Table Tennis
- ___ Volleyball Team (team name: _____)

FEE PACKAGES: *please check all that apply*

- | | | | | | |
|--------------------------|---------------|---------|--------------------------|-------------------|---------|
| <input type="checkbox"/> | Participant | \$35.00 | <input type="checkbox"/> | On-campus Housing | \$15.00 |
| <input type="checkbox"/> | Spectator | \$30.00 | <input type="checkbox"/> | Meal Package | \$30.00 |
| <input type="checkbox"/> | Adult Sponsor | \$20.00 | | | |

TOTAL FEES = \$ _____ *(make checks payable to your district NYI)*