

7.12

Certification for Chapter Display Contest

Illinois SkillsUSA Championships

Instructions: **TYPE OR VERY LEGIBLY PRINT ALL ENTRIES IN BLACK INK!**

Send two (2) copies of this form with all other pertinent forms directly to the Conference Registration Consultant.

Failure to submit this completed form will disqualify the Display from State and National competition.

Advisor Responsible for this Registration

Area Code -- School Phone Number

School Name and Complete Mailing Address

This entry is for **Secondary** **Post-Secondary competition. Check one.**

The name of the contestant who will be participating in the interview is:

If your school is entering more than one (1) display, describe the display for which this certification is being submitted.

The signatures below are to certify that the Display entered with this form was designed and constructed by Illinois SkillsUSA members at the above named school.

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Signature of Contestant
Being Interviewed

Signature of Advisor
Responsible for this
Certification

School Administrator's
Signature