

INNOV8 2022 SCHOOL ENTRY FORM



SCHOOL:	
TEACHER CONTACT NAME:	
CONTACT EMAIL:	CONTACT NUMBER:
NUMBER OF TEAMS PARTICIPATING IN-SCHOOL:	
Please email this completed top section to sturec@kirkleescollege.ac.uk by 12.00pm Friday 13th May 2022 .	
OR	
You can post the completed top section to: Student Recruitment, Kirklees College, Huddersfield Centre, Manchester Road, HD1 3LD	

There are no limits to the number of teams a school may involve. Schools can either have a number of teams competing against each other, the school should then select one team to represent them and submit their entry. **OR** a school can choose one team to submit an entry.

Once you have selected a team to represent your school please fill out the form below for each student in the team. This needs to be submitted along with their video presentation no later than **12.00 Friday 10th June 2022**.

SUBMITTED TEAM'S DETAILS

STUDENT 1		
NAME:	YEAR GROUP:	DATE OF BIRTH:
EMERGENCY CONTACT NAME:		EMERGENCY CONTACT NUMBER:
Do you have any medical conditions/allergies we should be aware of?		
Please note we will be taking photographs of students during the competition for college marketing purposes. If you DO NOT wish to be a part of these please indicate by ticking the box <input type="checkbox"/>		

STUDENT 2		
NAME:	YEAR GROUP:	DATE OF BIRTH:
EMERGENCY CONTACT NAME:		EMERGENCY CONTACT NUMBER:
Do you have any medical conditions/allergies we should be aware of?		
Please note we will be taking photographs of students during the competition for college marketing purposes. If you DO NOT wish to be a part of these please indicate by ticking the box <input type="checkbox"/>		

STUDENT 3		
NAME:	YEAR GROUP:	DATE OF BIRTH:
EMERGENCY CONTACT NAME:		EMERGENCY CONTACT NUMBER:
Do you have any medical conditions/allergies we should be aware of?		
Please note we will be taking photographs of students during the competition for college marketing purposes. If you DO NOT wish to be a part of these please indicate by ticking the box <input type="checkbox"/>		

STUDENT 4		
NAME:	YEAR GROUP:	DATE OF BIRTH:
EMERGENCY CONTACT NAME:		EMERGENCY CONTACT NUMBER:
Do you have any medical conditions/allergies we should be aware of?		
Please note we will be taking photographs of students during the competition for college marketing purposes. If you DO NOT wish to be a part of these please indicate by ticking the box <input type="checkbox"/>		

STUDENT 5		
NAME:	YEAR GROUP:	DATE OF BIRTH:
EMERGENCY CONTACT NAME:		EMERGENCY CONTACT NUMBER:
Do you have any medical conditions/allergies we should be aware of?		
Please note we will be taking photographs of students during the competition for college marketing purposes. If you DO NOT wish to be a part of these please indicate by ticking the box <input type="checkbox"/>		

Please email this section to **sturec@kirkleescollege.ac.uk** by **12.00pm Friday 10th June 2022**.
For any further enquires please contact **sturec@kirkleescollege.ac.uk** or call **01484 437092**.