



Intent to Participate Form

*Please print or type requested information and return this form before **February 10, 2017***

School Contact/
Advisor Name: _____ Title: _____

E-mail address: _____ Home Phone (optional): (_____) _____

School Name: _____

School Address: Street _____

City _____ State _____ Zip code _____

Preferred mailing address if different from school address: _____

School Phone: (_____) _____ School Fax: (_____) _____

Is the e-mail address written above the best way to reach you with important information? *(Check one)*

____ Yes ____ No *If no, please suggest an alternative:* _____

If we need to call, what are the best times to reach you? _____

Which categories does your school intend to enter? *(Please indicate the number of entries from each category)*

_____ Alternative Energy Sources _____ Medicine/ Healthcare

_____ Environment _____ New Materials

To aid our planning, please indicate the total number of students and total number of teams:

____ Total number of teams _____ Total number of students

By submitting this form, I am committing my school/students to entering the Chemagination contest.

I will: notify Dr. Hyslop or Dr. Deora immediately if there is any change in the status of our participation or our entries.

Signature: _____ Date: _____

Send or fax to:

Dr. Alison Hyslop, St. John's University, Chemistry Department,
8000 Utopia Parkway, Jamaica, NY 11439 Fax: 718-990-1876

Questions? Call Dr. Alison Hyslop at 718-990-5218 or E-mail: hyslopa@stjohns.edu
Dr. Nipa Deora at 212-220-8000 x7987 or E-mail: ndeora@bmcc.cuny.edu