

FORENSIC SKETCH ARTIST CONTEST REGISTRATION FORM

Please complete the form electronically or print CLEARLY

STUDENT'S NAME: _____

STUDENT'S GRADE: _____

SCHOOL'S NAME: _____

SCHOOL'S MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

COUNTY: _____

PLEASE SELECT YOUR ROLE: TEACHER ☐ GUARDIAN ☐

TEACHER OR GUARDIAN PHONE NUMBER: _____

TEACHER OR GUARDIAN

EMAIL ADDRESS: _____

TEACHER OR GUARDIAN SIGNATURE _____

By submitting this form, contestants agree to observe all rules regarding ethical conduct for the CSI Arizona program.

If you have any questions, please contact Leah Prager at
Leah.Prager@azflse.org or 602-359-7787.

Return Registration form to:

Leah Prager – Leah.Prager@azflse.org or
Arizona Foundation for Legal Services & Education
Attn: CSI Arizona Forensic Sketch Artist Contest
4201 N. 24 St, Suite 210
Phoenix, AZ 85016

