**SENIOR HIGH KNOWLEDGE BOWL**® **TEAM ROSTER**

Prepare one sheet per team, have students sign the bottom part, and bring this form to the sub-regional event.

Name of District: Team Name:

Advisor(s):

**Team Members: (please print) Grade**

1. 3

2 4

Alternate

**Minnesota Service Cooperative KNOWLEDGE BOWL®**

**Code of Conduct**

• As a student participating in the Minnesota Service Cooperative KNOWLEDGE BOWL® competition, I understand and accept the following responsibilities when participating in all events:

* I will respect the rights and beliefs of others and will treat others with courtesy and consideration.
* I will be fully responsible for my actions and the consequences of those actions.
* I will respect the property of others.
* I will respect and obey the rules of my school, the host site, and the laws of my community, state, and country.
* I will abide by the rules of the event.
* I will show respect for and abide by the decisions of the competition officials and host site personnel.
* By signing this, I acknowledge that I have read and agree to the above statements.
* I understand that Knowledge Bowl competitions are a privilege to attend. As a contestant, I understand that I am responsible for being respectful to myself, others, and the integrity of the competition. I understand that failure to adhere to this Code of Conduct may result in my disqualification and/or my team from further participation in any event.

Student’s Signature

Student’s Signature

Student’s Signature

Student’s Signature

Student’s Signature