



PHILIPPINE NUCLEAR SCIENCE QUIZ

## REGISTRATION FORM

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### School Details

Name of School: \_\_\_\_\_

School Address: \_\_\_\_\_

Region: \_\_\_\_\_ ☐ Public High School ☐ Private High School

School Principal/ Head: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Email Address: \_\_\_\_\_ Mobile No.: \_\_\_\_\_

### Video Entry Details

Video Entry submitted through: (please check appropriate box)

☐ Video Link: \_\_\_\_\_

☐ CD or Flash Drive

Video Title: \_\_\_\_\_

Video Creator/s: \_\_\_\_\_

Video Format: \_\_\_\_\_

Video Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Waiver

In consideration of the opportunity to submit our video entry in the qualifying level for the 2017 Philippine Nuclear Science Quiz (PNSQ) sponsored by the DOST-PNRI, I irrevocably give the PNSQ Committee and PNRI the right and permission to use, copy, alter, distribute, publish, broadcast, and display the Video that our school submitted in any other medium or format for any legal purpose. I acknowledge and agree that the PNSQ Committee may post our Video entry on the Internet and allow the public to vote and comment on the material. I attest that there is no copyrighted material in our Video entry. I also certify that all information provided in this registration form are true and complete.

<b>School Principal/ Head:</b>	
<b>Signature and Date:</b>	



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### School Representative Details

<b>Name of School:</b>		
<b>Name of Coach/ Adviser:</b>		
<b>Signature:</b>		
<b>1st Student Representative</b>	<b>2nd Student Representative</b>	
First Name: _____	First Name: _____	
Middle Name: _____	Middle Name: _____	
Surname: _____	Surname: _____	
Signature: _____	Signature: _____	
Year Level: _____	Year Level: _____	
Age: _____ Sex: _____	Age: _____ Sex: _____	

### Certification and Endorsement

This is to certify that the students listed above are bona fide students currently enrolled in our school. This is to further endorse their participation as representatives of our school to the 2016 Philippine Nuclear Science Quiz.

\_\_\_\_\_  
School Principal/ Head  
(Signature over printed name)

\_\_\_\_\_  
Date

### Parental Consent/ Waiver for 1st student representative

This is to certify that I am giving my full consent for my son/ daughter, \_\_\_\_\_, to travel to Metro Manila in case their team qualifies to the National Level Competition of the 2016 Philippine Nuclear Science Quiz. I further acknowledge that PNRI and the PNSQ committee will not be held liable for any untoward incident that may occur in connection with my son/daughter's participation to the 2016 PNSQ.

\_\_\_\_\_  
Name of Parent/ Guardian  
(Signature over printed name)

\_\_\_\_\_  
Date

### Parental Consent/ Waiver for 2nd student representative

This is to certify that I am giving my full consent for my son/ daughter, \_\_\_\_\_, to travel to Metro Manila in case their team qualifies to the National Level Competition of the 2016 Philippine Nuclear Science Quiz. I further acknowledge that PNRI and the PNSQ committee will not be held liable for any untoward incident that may occur in connection with my son/daughter's participation to the 2016 PNSQ.

\_\_\_\_\_  
Name of Parent/ Guardian  
(Signature over printed name)

\_\_\_\_\_  
Date