



# Public Sector Debate Competition Participation Approval Form

## Public Sector Entity Information

<b>Name of Entity:</b>	_____
<b>Address of Entity:</b>	_____

## Team Captain's Information

<b>Full Name</b>	
<b>Email Address</b>	
<b>Phone Number</b>	
<b>Alternate Team Member Contact Information</b>	Name: _____ Phone: _____

## Other Team members' information

<b>Team member 1</b>	Name: _____ Job Title: _____
<b>Team member 2</b>	Name: _____ Job Title: _____
<b>Reserve team member</b>	Name: _____ Job Title: _____
<b>Reserve team member</b>	Name: _____ Job Title: _____

## Head of Entity or Designate

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_