



RHINOLOGY BOWL TEAM REGISTRATION FORM

This interactive knowledge-bowl competition is open to residents only. Residency training programs and/or countries are invited to submit teams for this event. Each team will consist of two (2) residents, with one alternate permitted. Only two residents per team will complete in any one match – no substitution will be allowed during a match round. Any post graduate year resident is allowed. An individual who has graduated from the residency program is not permitted to register. A residency program/country may register more than one team. Pre-registration is required. The program director or resident must complete this form and either email (cathy.lafferty@uphs.upenn.edu) or fax (215-662-4515) to Cathy Lafferty no later than **April 1, 2009**.

(Please Print)

Residency Program/Country Name: _____

Residency Program Director/Contact:

Name: _____ Email: _____

Team 1

Name: _____ PGY: ___ Email: _____

Name: _____ PGY: ___ Email: _____

Alternate (optional): _____ PGY: ___ Email: _____

Team 2

Name: _____ PGY: ___ Email: _____

Name: _____ PGY: ___ Email: _____

Alternate (optional): _____ PGY: ___ Email: _____

Team 3

Name: _____ PGY: ___ Email: _____

Name: _____ PGY: ___ Email: _____

Alternate (optional): _____ PGY: ___ Email: _____