

Muscle Shoals Middle School Mathematics Tournament
November 2, 2024

Name of School _____

School Address _____

_____ ***Phone Number*** _____

Sponsors:

5th Grade _____ ***Email*** _____

6th Grade _____ ***Email*** _____

Acc 7 _____ ***Email*** _____

Acc 8 _____ ***Email*** _____

School type - Check one:

- ☐ ***Private or Academic Magnet (will be registered in large school division)***
☐ ***Alabama Public Middle School***
☐ ***Alabama Public High School***

Tutoring/enrichment centers or other groups
that do not function as students' official
school of record are not eligible

School Enrollment (total number of students in school for each grade)

School Enrollment: 5th _____ ***6th*** _____ ***7th*** _____ ***8th*** _____

Number of entrants in each level of competition:

5th grade _____ ***6th grade*** _____

Acc 7th _____ ***Acc 8th*** _____

TOTAL _____ ***x \$8.00 =*** _____ ***(minimum \$20)***

Late Fee (after October 11th) Add \$10.00 per team _____

Make checks payable to MUSCLE SHOALS MIDDLE SCHOOL. Please return this form and entry fee by October 11, 2024 to:

Chris Porter
Muscle Shoals Middle School
100 Trojan Drive
Muscle Shoals, Alabama 35661

Phone: (256) 389-2640
Fax: (256) 389-2647
Email: cporter@mscs.k12.al.us