



**SS-AAEA**  
**Academic Bowl Entry Form**  
2021 AAEA Annual Meeting  
8/1-8/3, Austin, TX  
Due July 16, 2021

**Chapter Information**

University \_\_\_\_\_ Date \_\_\_\_\_

Chapter Advisor \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

**Team Registration Information**

Number of Teams  One  Two

Number of Alternates  One  Two

\*Please note that alternates may only be substituted prior to the start of competition at the Annual Meeting.

**Meeting Registration Information**

Number of Student Meeting Registrations \_\_\_\_\_ @ \$40 = \_\_\_\_\_

\*Please complete the information on page two of the registration form for each student.

**Payment Information**

**Total \$** \_\_\_\_\_

Check (Drawn on U.S. bank payable to AAEA)

Credit Card

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Name on Card \_\_\_\_\_

Card Holder Email \_\_\_\_\_

AAEA  
Attn: Academic Bowl Entry  
555 East Wells St, Suite 1100  
Milwaukee, WI 53202  
Fax (414) 276-3349

If you have any questions, please contact Samantha Bilgrien at [sbilgrien@aaea.org](mailto:sbilgrien@aaea.org) or (414) 918-3190.

## Student Registration Information

Please complete the following information for each student being registered for the Annual Meeting

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City, St, Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City, St, Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City, St, Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City, St, Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City, St, Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

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City, St, Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

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City, St, Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City, St, Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Phone \_\_\_\_\_