

**PNWS-AWWA  
Tapping Contest Registration Form  
(4 Person Team Competition)**

Date \_\_\_\_\_

Subsection \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Phone \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Utility or Company Represented \_\_\_\_\_

In what manner was this team selected to represent your Subsection?  
\_\_\_\_\_

Name of Team \_\_\_\_\_

Name of Team Members \_\_\_\_\_ (Coach)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Note: Team names or crew nick-names are welcome as long as they are in good taste.

It is advised that the Subsection Secretary complete this form to insure all authorizations and requirements have been satisfied before submitting a team to represent the Subsection.

I authorize the \_\_\_\_\_ team to represent the \_\_\_\_\_ Subsection in Section Tapping Contest at the PNWS-AWWA Spring Conference.

\_\_\_\_\_  
Signature Subsection Secretary

\_\_\_\_\_  
Date

Return by April 15th to: Tom Pokorny  
8415 S. Vale Garden Road  
Canby, OR 97013-9371  
(503) 266-3188  
tompokorny@canby.com