

**2010 NDSRC Sputum Bowl
Team Registration Form**

Team Name: _____

Team Members: Name: _____

Name: _____

Name: _____

Name: _____ (Alternate)

Requirements:



Up to 3 members per team with one alternate.



Refer to www.ndsrc.org and click “sputum bowl rules and references”.



There is no cost to enter.



Team members are required to write 15 questions to be used during the competition.
A listing of this years references and rules is available on the NDSRC website.

www.ndsrc.org.

Please submit this form and questions by April 1st to:

dean.ahorn@trinityhealth.org

or mail printed form to:

Dean Anhorn
KeyCare Medical
400 Burdick Expwy E
Minot, ND 58701