



CUPERTINO SPEECH AND DEBATE

MEMBERSHIP APPLICATION

Name: _____

E-Mail: _____

AIM Screen Name (Optional): _____

Home Phone Number: (____) _____ - _____

Cell Number (If Applicable):(____) _____ - _____

Grade (Circle One):

9 10 11 12

Fourth Period Teacher & Room:

_____, Room _____

Why did you decide to join (Check all applicable)?

- 1.) I enjoy speaking and think S&D is fun. ____
- 2.) The posters were pretty! ____
- 3.) I want to get into a good college. ____
- 4.) I want to improve my speaking skills. ____
- 5.) My friends told me to join. ____
- 6.) Other (Please describe): _____

I am interested in (Circle applicable):

Debate Speech Both

Payment Option (Circle One):

Cash Check

Please attach **\$30** dollars to this form to cover your team payment.

Please write all checks to **"Cupertino High School Speech and Debate"** in FULL WITHOUT ABBREVIATIONS.

Officer Use ONLY:

Payment processed _____

Please sign up on our website, www.tinosd.org.

This will help facilitate communication and give you access to exclusive materials.

Your Website Username: _____

General Information:

All practices are in **Room 103**.

Speech Practices are Mondays at lunch

Debate Practices are Wednesdays after school until 4:15 PM.

Student Signature:

_____ Date: _____

Parent Signature:

_____ Date: _____

All parents are invited to attend our **parent meeting at 4:30 PM, September 23 in room 103**. At this meeting, we will give an overview of S&D and address any questions or concerns you may have. If you have any questions or concerns, please e-mail us at admin@tinosd.org.