

2019 High School Mock Trial Competition Registration Form

(Registration Deadline is Wednesday, November 14, 2018)

This form must be filled out in its entirety.

I am registering _____ team(s) for the 2019 Mississippi High School Mock Trial Competition.

Select the Regional your team/teams will attend:

Jackson (Jan. 19) _____ Coast (Gulfport) (Jan. 26) _____ Oxford (Feb. 2) _____

The registration fee per team is \$50. The deadline to register a team is November 14. Late registration is available, but an additional cost will be involved. Late registration must be accomplished by November 28. A late fee of \$25 will be assessed for teams registering after the November 14 deadline.

**Please make checks payable to The Mississippi Bar and mail with this completed form to:
The Mississippi Bar, René Garner, P. O. Box 2168, Jackson, MS 39225-2168.**

If you need additional information, please contact René Garner at rgarner@msbar.org

School Information

School Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Local Paper: _____

Teacher: _____ Cell Phone: _____

*Email: _____

of years with Competition: _____

Teacher, optional: _____ Cell Phone: _____

*Email: _____

of years with Competition: _____

*** We must have an email address for the teacher(s) as this will be the only form of communication between the school and the mock trial coordinator.**

Team Information

A team shall consist of a minimum of six (6) members up to nine (9) members, in grades 9, 10, 11 or 12 during the current academic year. No substitutions or alternates to the team roster will be allowed after the team registers at the Regional competition. I will send you a separate email for rosters. They will be due Wednesday, January 9, 2019 or as soon as you have them ready.

Team 1 Attorney Coach Information

Name: _____

Bar #: _____

Firm: _____

City: _____

Cell Phone: _____

Phone: _____

*Email: _____

of yrs. with competition: _____

Name, optional: _____

Bar #: _____

Firm: _____

City: _____

Cell Phone: _____

Phone: _____

*Email: _____

of yrs. with competition: _____

Team 2 Attorney Coach Information, optional

Name: _____

Bar #: _____

Firm: _____

City: _____

Cell Phone: _____

Phone: _____

*Email: _____

of yrs. with competition: _____

Name, optional: _____

Bar #: _____

Firm: _____

City: _____

Cell Phone: _____

Phone: _____

*Email: _____

of yrs. with competition: _____