



Nevada Association of SkillsUSA
REGIONAL SKILLS CONFERENCE
Registration Summary

PROGRAM INFORMATION	
Conference Year:	
School/Institution:	
Advisor Submitting Name:	
Advisor Submitting Email Address:	
Business Phone (with extension)	
School/Institution Fax:	
Submitting Advisor Cell Phone:	

REGISTRATION FEES			
Number of Contestants =		x \$30.00 =	
Number of Observers =		x \$0.00 =	
TOTAL REGISTRATION FEES DUE:			

**THIS FORM MUST BE UPLOADED TO THE PAYMENT WEBSITE.
 PLEASE FOLLOW ALL INFORMATION ON THE NEVADA SKILLSUSA WEBSITE.**