**MSRC Sputum Bowl Application**

April 1st and 2nd, 2020 | The Sheraton Hotel | Ann Arbor, Michigan

**Instructions:** Please complete the form, save the form with the team name, attach to an email and send it to [jcoddington@mhsa.com](mailto:jcoddington@mhsa.com) at the MSRC office **by February 14th, 2020.**

\*\*\* ALL TEAM MEMBERS **MUST BE AARC MEMBERS BEFORE MARCH 27th, 2020** \*\*\*

If you are not an AARC member, you can join by going to [www.aarc.org](http://www.aarc.org), click “Join/Renew” on home page to join online. Sputum Bowl applications can be submitted *prior* to AARC membership, but you must be an AARC member before March 27 to participate. Questions? Call 517-267-3909.

**Email this form to the MSRC Office: Joanna at** [**jcoddington@mhsa.com**](mailto:jcoddington@mhsa.com) **| Office: 517-267-3909**

**For Sputum Bowl questions contact Jeanine Steinaway** [**Jeanine.steinaway@stjoeshealth.org**](mailto:Jeanine.steinaway@stjoeshealth.org) **or**

**Phone: 1-734-712-1756 or 1-734-678-6007**

|  |  |  |
| --- | --- | --- |
| **TEAM ROSTER** | | |
|  | **Team Name**: | Click or tap here to enter text. |
|  | Practitioner Team |  |
|  | Student Team | 1st Year  2nd Year |
| **Player #1 | Team Captain** | | |
|  | **Team Captain Name:** | Click or tap here to enter text. |
|  | Employer: | Click or tap here to enter text. |
|  | Home Address: | Click or tap here to enter text. |
|  | City/State/Zip: | Click or tap here to enter text. |
|  | Cell Phone: | Click or tap here to enter text. |
|  | Email: | Click or tap here to enter text. |
| **Player #2** | | |
|  | Name: | Click or tap here to enter text. |
|  | Employer: | Click or tap here to enter text. |
|  | Home Address: | Click or tap here to enter text. |
|  | City/State/Zip: | Click or tap here to enter text. |
|  | Cell Phone: | Click or tap here to enter text. |
|  | Email: | Click or tap here to enter text. |
| **Player #3** | | |
|  | Name: | Click or tap here to enter text. |
|  | Employer: | Click or tap here to enter text. |
|  | Home Address: | Click or tap here to enter text. |
|  | City/State/Zip: | Click or tap here to enter text. |
|  | Cell Phone: | Click or tap here to enter text. |
|  | Email: | Click or tap here to enter text. |
| **Player #4** | | |
|  | Name: | Click or tap here to enter text. |
|  | Employer: | Click or tap here to enter text. |
|  | Home Address: | Click or tap here to enter text. |
|  | City/State/Zip: | Click or tap here to enter text. |
|  | Cell Phone: | Click or tap here to enter text. |
|  | Email: | Click or tap here to enter text. |