Columbus State University Model United Nations (CSUMUN) Registration Form

Complete section for your Model UN team:

School/Group Name _____

Coach Name: _____ Coach DOB: _____

Coach email: _____ Coach Address: _____

Coach Phone #:

	Roster			
	First Name	**Last Name**	**Amount paid**	**Waiver**
1				
2				
3				
4				
5				
6				
7				
8				
9				
##				
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	TOTALS	**Cash Amount**		All Rec'd:
		Check Amount		
		Credit Card Amount		Turned in to CSU:
		TOTAL		

******NOTE****** *Please email completed waivers and roster to thomas_monae@columbusstate.edu. If paying by credit card, please call Brooke Daniel at 706-507-8054 to pay over the phone or pay via registration link on the CSUMUN webpoage. If paying by cash or check, please drop off at the Elizabeth Bradley Turner Center anytime M-F 8am-5pm.*