



MASSACHUSETTS
**BUSINESS
PROFESSIONALS
of AMERICA**
Giving Purpose to Potential



Membership & Event Form

Name: _____

Gender: _____

Grade: _____

Student ID: _____

Shirt Size: _____

Student Cell Phone Number: _____

Active E-mail Address: _____

Event Slots: Written & Computer 5 slots, Judged 3 slots & Team 2 slots

Vocational Program: _____

Individual Event Choice(s) Refer to Secondary WSAP Guidelines: No more than 2 judged events(1 team event) & a 4 event limit: I am interested in the following individual events (in order of preference):

1. _____ 3. _____

2. _____ 4. _____

Would you be ok with speaking in front of judges for an individual event?

Yes ☐

No ☐

Team Event Choice(s) Refer to the attached Events-at-a-Glance

I am interested in the following events:

1. _____ 3. _____

2. _____ 4. _____

Would you be ok with speaking in front of judges for a team event?

Yes ☐

No ☐

Web Site Release Form

I hereby consent irrevocably to the use and reproduction of any and all photographs and/or video taken of me in any form whatsoever for Diman Regional Voc-Tech Business Professionals of America. Consent is also granted for any printed matter used in conjunction with the photograph(s) and with the use of my name in any part of the Diman Regional Voc-Tech BPA website, and other forms of social media, such as Twitter, Facebook, Instagram, etc. I have read this document and am fully aware of the content and implications, legal and otherwise.

Due October 20, 2023

Date _____ / _____ / _____

Student Signature _____

(Month) (Day) (Year)

Date _____ / _____ / _____

Parent Signature _____

(Month) (Day) (Year)