

REGISTRATION FOR CULINARY COMPETITION
★ CHARLWIN "BROERTJE" MARSHALL

Name:

Address:

Phone:

Mobile Phone:

Birthday (dd/mm/yy):

E-mail:

Job Owner:

Job task:

Name of Supervisor:

School name:

*I register myself as a (Mark this with an "X"):

Junior chef (Age of 16 – 20)

Senior chef (Age of 21 – 30)

*Every participant must bring their own cooking tools.

Approval: _____

Name: _____

Signature: _____

This registration form must be sent to:

Activiteiten.owcs@gmail.com with the subject of "Broertje" Marshall or can be delivered at "Sektor Kultura i Deporte, Koningin Wilhelminastraat 1".