THE AGGREGATE & QUARRY ASSOCIATION OF NZ

ROCK OUR FUTURE SCHOOL COMPETITION
ENTRY FORM 2020

Name of School: ……..

Contact person: ……...…

Contact details (email, phone): ……..

Student Name: …… Year: 5 6 7 8 (please circle)

Brief description of Project: ..……..

……

……

……

……

……

……

……

……

……

……

……

How did you hear about this competition?.....

Please return this form to office@aqa.org.nz before the end of Term Three, 2020.