Game-Making Deathmatch 2k5 Registration Form

Team Name:				
/*If you work alone and want	to be kr	nown by	your nar	ne, leave blank*/
First Member:				
• First Name:I	Last Name:			
• Email				
/*email used for general annour	ncements	during	the com	petition*/
• Which campus do you belong to?				
What program are you enrolled in?				
• What year are you in? 1 2	3	4	5	Grad
Second Member:				
• First Name: I	Last Nan	ne:		
• Email				
/*email used for general annour	ncements	during	the com	petition*/
• Which campus do you belong to?	St. (George	UTM	Scarborough
What program are you enrolled in?				
• What year are you in? 1 2	3	4	5	Grad
The following questions apply to	the te	am:		
 Do you allow GPC to keep a short cli 			e as a ref	ference (demo) for
future installments of the "Game-Mal		Č		
YES	C		NO	
 Do you allow the GPC to add your ga 	ame to G	PC arch	ives?	
YES			NO	
/*By signing bellow, I state th	hat the	informa		vided on this form i
correct, and I agree to obey th	he rules	and re	gulation	s of the Game-Making
Deathmatch.*/				
Agreement:				
Signiature of First Member:			Date:_	
Signisture of Second Member:			Date:	