

**For clarity, this form should be filled out either:**  
**1. by using Acrobat software, or**  
**2. by using a typewriter**



**New Jersey Office of the Attorney General**  
Division of Consumer Affairs  
124 Halsey Street, 7th Floor  
Newark, New Jersey 07102

**2025 New Jersey High School Consumer Bowl**  
**Team Member Form**  
*Return by November 8, 2024*

Please **type** or **fill in digitally** the names of your team members for the 2025 New Jersey High School Consumer Bowl competition. **Please make sure all names are correctly spelled and are readable.** The names you list will be printed on the “Certificates of Participation” which will be presented to each student.

Each team consists of five (5) students - four (4) team members plus an alternate.  
Alternate team members may be substituted for team members at the beginning of each round.

School name \_\_\_\_\_  
*(List the name of the school as you want it printed on all materials).*

Teacher/Advisor name \_\_\_\_\_

School Telephone number of Teacher/Advisor \_\_\_\_\_

Home and/or Cell Phone number of Teacher/Advisor \_\_\_\_\_  
*(To be used in case of cancellation because of weather conditions.)*

School Principal \_\_\_\_\_

Team Members (total of 5 only):

**Captain** \_\_\_\_\_

**Member** \_\_\_\_\_

**Member** \_\_\_\_\_

**Member** \_\_\_\_\_

**Alternate** \_\_\_\_\_

**Return this form to:**

**Dulcelina Pena**  
**Division of Consumer Affairs**  
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**Newark, NJ 07101**  
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