

National Debate Outreach Claremont Colleges Debate Union

Membership Application



MIDDLE SCHOOL PUBLIC DEBATE PROGRAM



Please register _____
(name of institution)

Please Check - Applying for MSPDP _____ ***HSPDP*** _____

Name _____
(institutional representative)

Address of Institution _____

City, State, Zip, Country _____

Phones - School/Mobile _____

Email _____