

**2022 USAD Nationals  
Calculator Use Form**

Please complete this form to include all members of your Academic Decathlon team.

Date: \_\_\_\_\_

School: \_\_\_\_\_

School District: \_\_\_\_\_

Coach's Name: \_\_\_\_\_ Coach's Phone: \_\_\_\_\_

Coach's Email: \_\_\_\_\_ Best time to be reached by phone: \_\_\_\_\_

<b>Decathlete's First Name</b>	<b>Decathlete's Last Name</b>	<b>Primary Calculator Brand/Model</b>	<b>Backup Calculator Brand/Model</b>

Complete this form by March 17, 2022 and mail to:

**USAD  
PO Box 4351  
Mankato, MN 56002**