



Tennessee State High School Mock Trial Competition

2014 TEAM REGISTRATION FORM PART 2

Team Information

School/Team Name: _____

Faculty Advisor: _____

Attorney Coach: _____

Plaintiff Line Up

NAMES OF ATTORNEYS:
(List attorney doing the opening FIRST
and attorney doing the closing LAST)

- 1.
- 2.
- 3.

DUTIES S/HE PERFORMS:
(e.g., Opening, Direct of _____,
Cross of _____, Closing)

REAL NAMES OF WITNESSES:
(In order they will be called)

- 1.
- 2.
- 3.

PART S/HE PLAYS:

Defense Line Up

NAMES OF ATTORNEYS:

- 1.
- 2.
- 3.

DUTIES S/HE PERFORMS

REAL NAMES OF WITNESSES:
(In order they will be called)

- 1.
- 2.
- 3.

PART S/HE PLAYS:

FORM FILLED OUT BY: (circle one) Faculty Advisor Attorney Coach

**Please return to Stacey Shrader Joslin by Monday, March 3
Fax: 615-297-8058; Email: sshrader@tnbar.org**