

Odyssey of the Mind
Team Registration Form
Regional Competition, March 10, 2012
CAYUGA- ONONDAGA BOCES

PLEASE ENTER YOUR MEMBERSHIP NAME EXACTLY:

A team may not compete unless both its State and National memberships are paid.

PLEASE PRINT:

National Number _____

Problem Name _____ Division I II III (please circle)

Coach's Name(s) _____

E-mail address _____ Phone (day) _____ Phone (evening) _____

Team Members (Please verify the spelling)	Birth date	Grade
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1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

If a coach or student participates with more than one team, fill in the following information:

Team Problem: _____

Division: _____

PLEASE NOTE:

Teams with deaf team members, or team members whose native language the judges may not understand, who enter a non-linguistic problem in competition must tell the tournament director a minimum of two weeks before the competition. If this is the case, the spontaneous problem will be a hands-on type of problem or a problem where the use of an interpreter will not handicap the team. For example, some problems require team members to write their answers. After the team's response time expires, these can be interpreted, if necessary, and judged.

If you have a non-linguistic member or members with a special need as defined above, write that person's name and special need: _____

PLEASE RETURN FORM TO BY DEC. 21, 2011:
DEB DALOIA – ISS DEPARTMENT, CAYUGA-ONONDAGA BOCES