

INTERNATIONAL TEAM REGISTRATION FORM ODYSSEY OF THE MIND[®] 2019 WORLD FINALS May 22 - May 25, 2019 at Michigan State University

To expedite processing and be eligible for the online discount, please complete this form online! OR fax OR mail it immediately!

IMPORTANT: To guarantee a performance time at the Odyssey of the Mind 2019 World Finals, **your team must register within 2 weeks of your competition.** You may register online through our website at www.odysseyofthemind.com.

Membership name:			Mem. #:				
Location (to be listed in Program)							
Mailing Address for Registration Confirmation:							
Primary Coach/Contact: Age (If under 21):							
Street:							
City: Sta			Country:				
Day phone: ()	Cell Phor	e: ()					
Email address:		Fax: (_)				
		DIVISION:	(please circle)	I II	III IV		
Day, time and flight information for your arrival:							
Day, time and flight information for your departur	re:						
ARRIVAL AT REGISTRATION: Day	Estimate	ed Time	a.m		p.m.		
Native Language of team:							

Please Read Carefully: Fees for facility rental, recreational activities, parties, security, shuttle services and other special programs are included in all the room and board packages offered by Michigan State University. To offset a portion of these costs, teams that **do not** purchase packages for all team members and, at minimum, one coach must pay a facilities fee. The amount of this facilities fee is \$2500 if the team's registration form is received and/or postmarked within two weeks of the team's competition; \$3000 if received and/or postmarked after that date. The payment of this fee must be made by check, purchase order or credit card to CCI no later than April 26, 2019, to include the team in the final schedule. You may mail, fax, or register and pay online as noted elsewhere on this form. Please check your registration at www.odysseyofthemind.com/wf2019 instead of contacting our office.

Please Check One: (This is not binding. Please do not delay! Changes can be made until April 26, 2019.)

• Our team will purchase Odyssey-provided housing. We expect to have _____ people in housing.

(Please complete the Lodging and Meals Reservation Form)

(Note: This will not guarantee rooms. You must complete the Lodging and Meals Reservation Form within 2 weeks of the team's competition and send payment by April 26, 2019 to guarantee rooms.)

• Our team does not plan to stay in Odyssey-provided housing and will pay the facilities fee of:

□ \$2500 (Registration must be received and/or postmarked within 2 weeks of the team's competition to qualify)

□ \$3000 (Late Registration – more than 2 weeks after team's competition)

(Individual meals can be purchased on campus at select locations.)

Payments can be made by check or purchase order (provide original) made out to CCI or by Credit Card.						
Payment type: Vis	a MasterCard	American Express	Discover			
Credit Card #:		Expirati	ion Date:			
CVV Code:	Name as printed on card	:Signature: _				

The Team Member Information must be completed on the reverse side of this form. Check your registration at <u>www.odysseyofthemind.com/wf2019</u>

CANCELLATIONS AFTER April 26, 2019 WILL BE SUBJECT TO 50% PENALTY. NO REFUNDS AFTER MAY 3, 2019. List names of all additional coaches: Each team will receive two complimentary tickets to the Coaches Recovery Party. Additional tickets can be purchased at Souvenir Sales during World Finals. Provide ages for coaches under 21.

-1	

2.

List all team members with their home addresses. Please type or print clearly.

1.		5.						
2.	Age: Gender:	6.			-			
3.	Age: Gender:	7.			-			
4.	Age: Gender:	lf not						competition
А.	Age: Gender: SCHEDULING CONCERNS – Please check tho	hours compet conside team w	is need tition site erations rill be cor	ed to es or v noted ntacted	get fro vice vers below v	m Ion a. All	g-term to valid speci	. At least 1½ spontaneous al scheduling dated or the
	[] Team member is on more than one competing Other Team membership #	-	Division(c)	1	1	/	
	[] Coach of more than one competing team:	110010111/1		3)	_ ′	/	/	_
	Other Team membership # [] Coach or team member will arrive Thursday of		Division(s)	_/	/	/	_
	Arrival Day and Time:	 M Saturday						·····
	Departure Day and Time:							
в.	LANGUAGE CONCERNS – Native language is	not English ar	nd all tea	am me	mbers a	re no	t fluent in	English:
	Please list language:							
C.	DISABILITY CONCERNS – Team member or Co	oach has spec	ial need	ls.				
	Please list:							
D.	BUDDY TEAM - A Buddy Team is a U.S. tear while you are on campus. Your B obtaining any materials or services	m competing a Buddy Team v	at World will assi	l Fina st yo	ls that h ur team	ias vo in ge	olunteered etting arou	
	[] Yes, our team would like to have a Buddy Tea		,	~				
	[] No, our team does not need a Buddy Team.							