TEAM REGISTRATION FORM

- ★ This information is required for the state online registration: www.floridaodysseyofthemind.org.
- ★ THIS FORM STAYS WITH THE COORDINATOR.
- Register teams by December 15. PLEASE NOTE: Team info can be edited UNTIL the payment button is clicked. After that you will NOT be able to change coach or team member information.

PLEASE PROVIDE COACH'S ACTUAL INFORMATION, NOT SCHOOL OR COORDINATOR ADDRESS OR PHONE NUMBER.

Problem Name:		_* Division:*
COACH 1:		
FIRST NAME:	* LAST NAME:	*
HOME ADDRESS:		*
CITY:* ZIP:	* Cell Phone	=: ()
HOME PHONE: ()	EMAIL:	*
* required fields (one phon requested, but is not require		hone preferred; fax number may be
COACH 2:		
FIRST NAME:	LAST NAME:	
HOME ADDRESS:		
CITY: ZIP:	CELL PHONE:	: ()
HOME PHONE: ()	EMAIL:	

<u>ROSTER INFORMATION</u>: (Maximum 7 members for any team, including primary teams)

FULL NAME	GRADE*	SCHOOL

*Grade of each team member is required. School can be abbreviated.

More on the reverse----- \rightarrow

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Team Member Scheduling Conflicts: Free Text (500) - IF NONE, TYPE NONE

- \Rightarrow A member on more than one team
- \Rightarrow A member related to a member on a team from <u>another school</u>
- \Rightarrow A member related to a coach of a team from <u>another school</u>
- \Rightarrow A member who is color blind or physically handicapped in some way

Coach Scheduling Conflicts: Free Text (500) - IF NONE, TYPE NONE.

- ✓ Coaching more than one team
- ✓ Coach is related to a team member from another school

Additional Requirements: Free Text (500) - IF NONE, TYPE NONE

- ★ School-wide event on day of tournament, please schedule early or late.
- ★ Several team members have soccer tournament, please schedule early or late.

ALL TEAMS FROM THE <u>SAME</u> SCHOOL WILL HAVE <u>DIFFERENT</u> LONG TERM PERFORMANCE TIMES. YOU DON'T NEED TO REQUEST THAT.

SCHEDULING CONFLICTS WILL BE HONORED IF POSSIBLE - NO GUARANTEES.

COORDINATOR'S CHECKLIST:

- $\hfill\square$ I gave the coach the important dates page.
- $\hfill\square$ I gave the coach the regional t-shirt order form.
- \Box I gave the coach the training dates flyer(s).
- □ I made sure the coach has a copy of the current Odyssey Program Guide.
- □ I verified these coaches as approved volunteers on (date): _____
- □ I registered and paid for this team on (date): _____

PLEASE NOTE: FLORIDA Odyssey of the Mind IS <u>UNABLE TO ACCEPT PURCHASE ORDERS</u>. We do accept credit cards (Visa, Discover, MasterCard, Discover, American Express, & PayPal). Use our secure online registration to pay using this method at <u>www.floridaodyssey</u> <u>ofthemind.org</u> and click on "Team Registration." You will be charged a convenience fee for online payments. Team Registrations may be paid by check by following the directions on the website. <u>DO NOT SEND REGISTRATION MONEY TO THE REGIONAL DIRECTOR</u>.

ALL TEAMS MUST BE REGISTERED ONLINE & PAID BY DECEMBER 15. The website will be LOCKED on JANUARY 17. After that any team not FULLY AND COMPLETELY REGISTERED WILL HAVE TO PAY A LATE FEE.