



DestinationImagiNation of NewYork 2011-2012 EASTERN REGION SCHOOL REGISTRATION FORM

Complete one form for each SCHOOL BUILDING - copy this form as needed:

School Name: _____ District: _____

Principal: _____ Phone: _____ Email: _____

DI Coordinator: _____ Phone: _____ Email: _____

School Mailing Address: _____

City: _____ Zip code: _____

Your district will be billed through BOCES school billing when the registration is received. In addition, for schools outside the Putnam/Northern Westchester BOCES region, a cross contract will be sent to your district for processing. Non-BOCES participating schools: Please note that the registration fee will be subject to a 14.37% administrative fee.

Each team must also submit a Team Registration Form. (Forms available at www.nydi.org.) To be assured of a place in the regional tournament please submit your completed School Registration and Team Registration by January 15, 2012.

No memberships will be accepted or processed after February 15, 2012.

Destination ImagiNation team registration:

PRICES INCLUDE ALL REGISTRATION FEES—NATIONAL, STATE, AND REGIONAL (except Global Finals)

Number of competitive teams: _____ x \$400 per team = _____

Number of Rising Stars teams _____ x \$145 per team = _____

TOTAL to be billed: (sum of the above two lines) _____

No refunds for cancellation after payment is made...

District Administrator (SIGNATURE REQUIRED) Date

Print Name of District Administrator: _____

Mail to: Robin Levine
Curriculum & Instructional Services Dept.
Putnam/Northern Westchester BOCES
200 BOCES Drive
Yorktown Heights, NY 10598
Tel: (914) 248-2331 Fax: (914) 248-2390

Please address all questions regarding registration to:
Seth A. Davis
Eastern Regional Director
Suite 102
411 Theodore Fremd Avenue
Rye, NY 10580
Tel: (914) 925-0000 Fax: (914) 925-9344
Email: sdavis@eliasgroup.com