



Eastern Region Tournament Team Registration

Return this form by 1/8/12 to:
Seth A. Davis, Regional Director
Suite 102
411 Theodore Fremd Avenue
Rye, NY 10580

*The information on this registration will be used to schedule the team for the Tournament. **PLEASE PRINT.***

School Name: _____ Membership #: 134_____

Challenge: *check one*

- _____ Challenge A: *Assembly Required*
- _____ Challenge B: *The Solar Stage*
- _____ Challenge C: *Coming Attractions*
- _____ Challenge D: *News To Me*
- _____ Challenge E: *Hold It!*
- _____ Rising Stars!: *Built To Last*
- _____ projectOUTREACH: *The World Canvas*

Level: *check one*

- _____ Elementary Level (K – 5th grade)
OR *No member age 12 by 6/15/12*
- _____ Middle Level (6th – 8th grade)
OR *No member age 15 by 6/15/12*
- _____ Secondary Level (9th – 12th grade)
OR *No member age 19 by 6/15/12*

Team Name: *PRINT CLEARLY!*

Team Member	Date of Birth	Grade

If your Rising Stars! team has more than 7 team members list on back & check here

Team Manager	Phone	E-mail

Special Considerations:

Please include information such as a Team Manager with more than one team (list additional team information), a team member or Manager with physical disability, or alternate language preferences other than English. Special schedule consideration needed – be specific about the reason! PLEASE LIST THIS INFORMATION ON BACK OF PAGE.

CHECK HERE IF YOU HAVE LISTED SPECIAL CONSIDERATION NEEDS ON BACK

Appraiser Information: Each team **is required** to provide ONE Appraiser by 1/20/12. You will also be given a Volunteer assignment shortly before the Regional Tournament

Name: _____

Email: _____ Phone: _____

Address: _____

YOUR TEAM WILL NOT BE SCHEDULED WITHOUT VOLUNTEER INFORMATION!

If you can provide more than one volunteer please list on back & check here