

NEW YORK STATE SCIENCE OLYMPIAD NEW SCHOOL REGISTRATION FORM

To register complete this **original** registration form (with the red original) and send it, with your **CHECK** for \$125.00 payable to the **NEW YORK STATE SCIENCE OLYMPIAD INC.**, to the address at the bottom of this page. **Please note that this form is only for schools that have never competed in Science Olympiad before, and wish to register for the reduced rate under the New Schools promotion, including all restrictions in that promotion.**

The registration fee is nonrefundable.

Purchase orders cannot be accepted for registration.

School information:

School Name: _____
Address: _____
City: _____ Zip code: _____
County: _____
Telephone: (_____) _____ Fax: (_____) _____

Check one: _____ Division B (Grades 6-9) _____ Division C (Grades 9-12)

Coach Information*

Coach #1 _____
Home Address: _____
City: _____ State: _____ Zip: _____
Home Phone: (Do not enter school number) (_____) _____
Specific science subjects taught, e.g. Biology: _____
e-mail address: _____

Coach #2 _____
Home Phone: (Do not enter school number) (_____) _____
Specific science subjects taught, e.g. Biology: _____
e-mail address: _____

ONLY ORIGINAL FORMS WILL BE ACCEPTED. A FORM WITH BLANK SPACES WILL BE RETURNED WITHOUT PROCESSING.

* There must be at least two coaches for every team entered

REGISTRATION DEADLINE IS TWO WEEKS BEFORE THE FIRST REGIONAL TOURNAMENT IN YOUR DIVISION. TEAMS THAT SUBMIT REGISTRATIONS AFTER THE DEADLINE WILL BE ACCEPTED ON A SPACE-AVAILABLE BASIS.

Mail registration and **check** to: New York State Science Olympiad
1 Lakeside Drive
Valhalla, New York 10595-1944