

**Florida Odyssey of the Mind Association, Inc.
2011 – 2012 REGIONAL TOURNAMENT**

WORKER REGISTRATION

I, (*print name*) _____ represent a team from
(*school*) _____ Membership# _____
competing in (*problem name*) _____, (*division*) _____

I may be reached at:

Address: _____

City: _____ Zip: _____

Telephone: (*Include area code*)

(*day*) _____ (*fax*) _____

(*eve*) _____ (*e-mail*) _____

I would prefer to work in the following position: (circle one)

Registration	Sales	Friday night set-up	Scoreroom
Information	Food/Hospitality	Door Monitor	Runner

My past Odyssey of the Mind experiences include: _____

I am a former Odyssey of the Mind team member: _____ Yes _____ No

I understand that, even though I might not receive my final official assignment until competition day, it is my responsibility to arrive at the officials' check in at my designated time. I acknowledge that **if I do not uphold my obligations, the above team will be assessed a \$100 fine and will receive a 25 point spirit of the problem penalty.**

Every effort will be made to allow a worker to see a family member perform. Please list all other teams you are affiliated with, including the school, problem, and division for each team.

Signed: _____