



**TEAM REGISTRATION FORM**  
**ODYSSEY OF THE MIND® 2008 WORLD FINALS**  
**May 31-June 3, 2008 at the University of Maryland – College Park**

**Complete this form online and SAVE!! OR fax OR mail it immediately.**

**IMPORTANT:** To guarantee a performance time at the Odyssey of the Mind 2008 World Finals, **your team must register within 2 weeks of your state competition.** You may register online through our website at **www.odysseyofthemind.com**.

Membership name: _____		Mem. #: _____	
Location (to be listed in Program) _____			
<i>Mailing Address for Registration Confirmation:</i>			
Primary Coach/Contact: _____		Age (If under 21): _____	
Street: _____			
City: _____	State/Prov.: _____	Zip: _____	Country: _____
Day phone: (_____) _____		Evening Phone: (_____) _____	
E-mail address: _____		Fax: (_____) _____	
<b>PROBLEM NAME:</b> _____		<b>DIVISION:</b> (please circle) I      II      III	
ARRIVAL AT REGISTRATION: Day _____ Estimated Time _____ a.m. _____ p.m.			

If competing in Tee Structure, please indicate actual (not anticipated) weight held: \_\_\_\_\_ lbs.

**Please Read Carefully:** Fees for facility rental, recreational activities, parties, security, shuttle services and other special programs are included in all the room and board packages offered by the University of Maryland-College Park. To offset a portion of these costs, teams that **do not** purchase packages for all team members and, at minimum, one coach must pay a facilities fee. The amount of this facilities fee is \$2500 if the team's registration form is received and/or postmarked within two weeks of the team's competition; \$2750 if received and/or postmarked after that date. The payment of this fee must be made by check, purchase order or credit card to CCI no later than May 1, 2008, to include the team in the final schedule. You may mail, fax, or register and pay on-line as noted elsewhere on this form.

**Please Check One:**

☐ **Our team will purchase Odyssey-provided housing.** We expect to have \_\_\_\_\_ people in housing.

(Please complete the Lodging and Meals Reservation Form)

(Note: This will not guarantee rooms. You must complete the Lodging and Meals Reservation Form within 2 weeks of the team's competition and send payment by May 1, 2008 to guarantee rooms.)

☐ **Our team does not plan to stay in Odyssey-provided housing** and will pay the facilities fee of:

☐ \$2500 (Registration must be received and/or postmarked within 2 weeks of the team's competition to qualify)

☐ \$2750 (Late Registration – more than 2 weeks after team's competition)

*Note: A Lodging and Meals Reservation Form must be completed for teams requesting Meals Only Packages.*

Payments can be made by check or purchase order (provide original) made out to CCI or by Credit Card.	
Payment type: Visa _____	MasterCard _____ American Express _____ Discover _____
Credit Card #: _____	Expiration Date: _____
Name as printed on card: _____	Signature: _____

**The Team Member Information must be completed on the reverse side of this form.**

**Check your registration at [www.odysseyofthemind.com/wf2008/teams.nhn](http://www.odysseyofthemind.com/wf2008/teams.nhn)**

Team Membership # \_\_\_\_\_ Prob/Div \_\_\_\_\_

**List names of all additional coaches:** Each team will receive **two complimentary tickets** to the Coaches Recovery Party. Additional tickets will be available for sale on a limited basis during World Finals. Provide ages for coaches under 21.

1. \_\_\_\_\_
2. \_\_\_\_\_

**List all team members with their home addresses. Please type or print clearly.**

- |   |   |
|---|---|
| <p>1. _____<br/>_____<br/>_____<br/>_____ Age: ____ Gender: _____</p> <p>2. _____<br/>_____<br/>_____<br/>_____ Age: ____ Gender: _____</p> <p>3. _____<br/>_____<br/>_____<br/>_____ Age: ____ Gender: _____</p> <p>4. _____<br/>_____<br/>_____<br/>_____ Age: ____ Gender: _____</p> | <p>5. _____<br/>_____<br/>_____<br/>_____ Age: ____ Gender: _____</p> <p>6. _____<br/>_____<br/>_____<br/>_____ Age: ____ Gender: _____</p> <p>7. _____<br/>_____<br/>_____<br/>_____ Age: ____ Gender: _____</p> |
|---|---|

**All valid special scheduling considerations noted below will be accommodated or the team will be contacted.**

**A. SCHEDULING CONCERNS – Please check those that apply and explain:**

☐ Team member is on more than one competing team:

Other Team membership # \_\_\_\_\_ Problem/Division(s) \_\_\_\_/\_\_\_\_ \_\_\_\_/\_\_\_\_ \_\_\_\_/\_\_\_\_

☐ Coach of more than one competing team:

Other Team membership # \_\_\_\_\_ Problem/Division(s) \_\_\_\_/\_\_\_\_ \_\_\_\_/\_\_\_\_ \_\_\_\_/\_\_\_\_

☐ Coach or team member will arrive Sunday or later

Arrival Day and Time: \_\_\_\_\_

☐ Coach or team member will leave before 5 PM Tuesday

Departure Day and Time: \_\_\_\_\_

**B. LANGUAGE CONCERNS – Native language is not English and all team members are not fluent in English:**

Please list language: \_\_\_\_\_

**C. DISABILITY CONCERNS – Team member or Coach has special needs.**

Please list: \_\_\_\_\_

**RETURN FORM IMMEDIATELY TO: Creative Competitions, Inc., 406 Ganttown Road, Sewell, NJ 08080 or Fax: (856) 256-2798. REGISTRATION CLOSING May 1, 2008. Individual Confirmations will be sent for each team.**