



www.minnesotaso.org

Minnesota Science Olympiad

REGISTRATION FORM

This letter confirms registration to participate in the Minnesota Science Olympiad in the 2011-2012 season. We understand that there is a **\$125 annual membership fee for the first team (and a \$75 fee for each additional team)** that must be paid before competing.

Neil Michels
President, Treasurer & Regional Director
Apple Valley High School

Each team must have its own coach at minimum. Please note below who will coach each team by indicating **Team 1, Team 2, etc.** or write in **Assistant Coach** next to the name of each coach.

Brandi Hansmeyer
State & Regional Director, Division B
Kenwood Trail Middle School

Our designated coach will complete travel arrangements, accompany or see that our team is accompanied at Science Olympiad events, and represent our school as necessary (run a region event at C level, for example).

Michael Huberty
State Director, Division C
Mounds View High School

Chris Markham
Secretary & Regional Director
Kenwood Trail Middle School

Cheryl Moertel
Regional Director
Century High School

Randall Hall
Board Member
Arlington High School

Robert Ramgren
Co-Regional Director
Bethel University

Matt Neibergall
Co-Regional Director
Bethel University

Mark Brandt
Board Member
Eagan High School

William Wellnitz
Board Member
Augusta State University, retired

Kathie Michels
Board Member
Apple Valley High School, retired

Elise Sheehan
Regional Director
Providence Academy

Joan Truettner
Regional Director
Minnetonka Middle School East

Karen Hohenstein
Regional Director
Delano High School

Andrew Tubeing
Board Member
University of St. Thomas

Anthony Bormann
Regional Director
MN State University Moorhead

Check only one : <input type="checkbox"/> Division C (Grades 9-12) <input type="checkbox"/> Division B (Grades 6-9)	
We are registering (check only one): <input type="checkbox"/> 1 team, <input type="checkbox"/> 2 teams, or ____ # teams	
If you or any member of your team has any special needs, please contact your state director in advance of any Science Olympiad event in which your team participates to ensure proper arrangements can be made. See website for director's name and email information.	
School Name:	
Principal's Name:	
Mailing Address:	
City, State, Zip:	
School Phone:	School Fax:
<u>Coach 1</u> (indicate team 1, 2, etc.)	<u>Subjects Taught</u>
<u>Home Phone</u>	<u>E-Mail</u>
<u>Signature Coach 1:</u>	
<u>Coach 2</u> (indicate team 1, 2, etc.)	<u>Subjects Taught</u>
<u>Home Phone</u>	<u>E-Mail</u>
<u>Signature Coach 1:</u>	
<u>Coach 3</u> (indicate team 1, 2, etc.)	<u>Subjects Taught</u>
<u>Home Phone</u>	<u>E-Mail</u>
<u>Signature Coach 1:</u>	

Do not send your membership fee now. You will be sent a bill after we receive this registration form. Your registration fee must be paid before the first event in which your team participates. Please follow directions on the billing invoice for payment.

Please mail this signed letter to the address at the right or email this information to cmarkham@isd194.k12.mn.us by December 9, 2011.

<p>Minnesota Science Olympiad c/o Chris Markham Kenwood Trail Middle School 19455 Kenwood Trail Lakeville, MN 55044</p>
