



2010 KY Tournament Team Registration

For each team, complete one form & send \$50 Tournament fee by January 15, 2010
 Email form: simon.dodd@alum.mit.edu
 Mail form: KY DI c/o Simon Dodd
 3241 Malone Dr.
 Lexington, KY 40513
 **** Make checks payable to KY DI ****

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

| | |
|------------------|---------|
| Team Name: | Team #: |
| School District: | City: |

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|------------|--------|
| Challenge: | Level: |
|------------|--------|

Team Information:

| Team Member Name | Date of Birth | Grade | School |
|------------------|---------------|-------|--------|
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ONLY Rising Stars! teams may have more than 7 team members. Please list additional team members on the back of this page. If your Rising Stars! team has more than 7 team members, check here

| Team Manager | Phone | E-mail |
|--------------|-------|--------|
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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.

Appraiser Information: Each team is **required** to provide ONE Appraiser/Tournament volunteer.

| | |
|------------------|-----------------------|
| Name: | Phone: |
| Email: | Challenge Preference: |
| Role Preference: | Years Experience: |

Volunteer Information: Each team is **required** to provide TWO 2-hr tournament volunteers.

| | | |
|-------|--------|--------|
| Name: | Phone: | Email: |
| Name: | Phone: | Email: |