WRIGHT STATE UNIVERSITY
SCIENCE OLYMPIAD INVITATIONAL
February 6, 2016
Registration Form

_____ 1 Team _____ 2 Teams

School/Team Name _____________________________________________________________

Division (circle one)  B  C

School/Team Name (2nd team) ___________________________________________________

Coach/Contact Person ________________________________________________________

Contact Address _____________________________________________________________

Contact City, State, Zip Code __________________________________________________

Contact Phone (wk) __________________ (home) __________________ (cell) ____________

E-mail ____________________________________________________________

Please note your preference (1st thru 6th) for events that your team will be responsible to
run. We are asking each team registered to run one event (including creating the tests, bringing
copies, providing equipment necessary and timing devices). If you register two teams, we will
ask you to run two events. The first registrations received will be given their higher preferred
choices, so get your form to us as soon as possible.

Event Choices

1st Choice ________________________________  4th Choice ____________________________

2nd Choice ________________________________  5th Choice ____________________________

3rd Choice ________________________________  6th Choice ____________________________

Mail or Fax Registration Form to reserve your spot:
Wright State University
3640 Colonel Glenn Highway
186 Student Union
Dayton, OH 45435-0001
Phone (937) 775-5512
Fax (937) 775-5527

For More Information Contact:
CeAnn Chalker
chalker@ix.netcom.com
(937) 436-0578

Check for $85 per team due by December 15 & made payable to:
Wright State University