

**Ohio Kids for Creativity Region 1**

Destination Imagination® 2017

**Team Tournament Registration Worksheet**

Use this form to collect information for the official on-line entry form.

PLEASE PRINT LEGIBLY

Please use this form to complete the online Registration and submit the **Tournament Fee** to Bob Capp, Treasurer; 1166 Townsend Ave. Youngstown, OH 44505; Checks Payable to: Ohio Kids for Creativity Region 1  
**Early Bird Tournament fees** will be due by **31 Dec 2016**. **Standard Tournament fees** will be due by **15 Jan 2017**.  
 Rising Star Team Fee = \$15.00 (No other discounts apply); Standard DI Team Fee = \$45.00  
 Less discounts: Active Board Participant Discount = \$10.00/team; Early Bird Discount = \$5.00/team (if paid by 12/31)

Membership or DISTRICT Name: \_\_\_\_\_ Membership #: 135- \_\_\_\_\_

Include Hyphenated Numbers

School Name: \_\_\_\_\_

<b>Challenge (please check):</b>	<b>Manager Information (only 1 mandatory)</b>	<b>Appraiser Information (both are mandatory)</b>
A: Technical <i>Show &amp; Tech</i>	Manager 1: _____	Appraiser 1: _____
B: Scientific <i>Top Secret</i>	Address: _____	Address: _____
C: Fine Arts <i>Vanished</i>	City, St, Zip: _____	City, St, Zip: _____
D: Improvisational <i>3-Peat</i>	Phone: (____) ____-_____	Phone: (____) ____-_____
E: Engineering <i>In It Together</i> (formerly defined as "Structural")	E-mail: _____	E-mail: _____
pO: Service Learning <i>Ready, Willing &amp; Fable</i>		This Appraiser is related to someone on this team? (Circle) YES NO
RS: Rising Stars/Early Learning <i>Save the Day</i>		
<b>Level (please check):</b>	<b>Manager 2:</b> _____	<b>Appraiser 2:</b> _____
PL-Primary Level (pre-K-2 <sup>nd</sup> Rising Stars)	Address: _____	Address: _____
EL-Elementary Level (K – 5 <sup>th</sup> grade)	City, St, Zip: _____	City, St, Zip: _____
ML-Middle Level (6 <sup>th</sup> – 8 <sup>th</sup> grade)	Phone: (____) ____-_____	Phone: (____) ____-_____
SL-Secondary Level (9 <sup>th</sup> – 12 <sup>th</sup> grade) OR No student born before June 15, 1998	E-mail: _____	E-mail: _____
		This Appraiser is related to someone on this team? (Circle) YES NO

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

➔ Each team is **required** to provide **2** Appraisers (Primary & Alternate) and **1** Tournament volunteer. RS teams are only required to supply 1 Appraiser and 1 Volunteer. Appraiser and volunteer names are required ON THIS FORM in order for us to credit them to your team. Appraisers and volunteers are **ALSO REQUIRED** to submit their own detailed form by **11 Feb 17**.  
**Forms are on our website [www.region1di.org](http://www.region1di.org). If the Appraiser and Volunteer forms are not completed, your registration for the tournament is not incomplete.**  
 Volunteer Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

➔ **Special Considerations:** Please include information such as a Team Manager with more than one team (**provide additional team information**), a team member or Manager with physical disability and any potential schedule conflicts.  
 The information needs to be included on **this** form so that we may schedule the tournament in a timely manner.  
 Check the box, put details on the back of this form.

We have **Special Considerations** [check]