

FORM C

MISSOURI ACADEMY OF SCIENCE (MAS)
PRE-REGISTRATION FORM – 2009 ANNUAL MEETING
Northwest Missouri State University – Maryville, Missouri
Junior Division -- Judges/Parents/Guests/Other

(print or type)
Last Name: _____ First Name: _____ Middle Initial: _____

School _____ City _____

HOME ADDRESS _____

City: _____ State: _____ Zip Code: _____

Work Phone (_____) _____ Home Phone (_____) _____

E-mail Address _____

DISTRICT COMPETITION NAME AND/OR NUMBER _____

WINNING STUDENT _____

REGISTRATION CATEGORY AND FEES:

Judge (attending sessions only).....	\$ 5.00	<u>Paid by MAS Junior Division</u>
Non-Member of MAS K-12 Teacher.....	\$ 25.00	\$ _____
MAS Member K-12 Teacher.....	\$ 20.00	\$ _____
Visitor (Spouse/Student K-12/Other).....	\$ 5.00	\$ _____
Parent of Winning Student.....	\$ 5.00	\$ _____
Banquet (Friday, 4/24 at 6:30 p.m.).....	\$ 16.00	\$ _____
Breakfast (Saturday, 4/25 at 7:00 a.m.)	\$ 9.00	\$ _____
MAS Lapel Pins.....	\$ 5.00	\$ _____

**LATE FEES: Postmarked more than 7 days after district competition
or after April 7th\$ 15.00** \$ _____

NO REFUNDS! TOTAL DUE \$ _____

Deadline: This form must be sent with payment and be postmarked no later than 7 days after the competition or by April 7th, whichever comes first.

MEAL TICKETS MUST BE ORDERED IN ADVANCE! NO TICKETS SOLD ON SITE!

You must pick up your registration packet with the above items before attending sessions on Friday at registration.

Disabilities/Special Needs: _____

Please send immediately after district competition to:

Missouri Academy of Science
Attn: Paula L. Macy
W.C. Morris 206A
University of Central Missouri
Warrensburg, MO 64093
Telephone: 660-543-8734
FAX: 660-543-4355
E-Mail: macy@ucmo.edu

Method of Payment:
 Check enclosed, payable to MAS
 School purchase order enclosed, PO# _____
 PayPal (You are responsible for the transaction fees)

REGISTRATION REQUIRED - ONE PERSON PER FORM - NAME BADGES MUST BE WORN!