REGISTRATION FORM FOR MATH OLYMPIADS 2007-2008

Parent's Name: ______________________________________________________

Address: ___________________________________________________________

City / State / Zip: ____________________________________________________

Phone number and if applicable an emergency phone number where someone can be reached Tuesday evenings:
_________________________________________________________________

E-mails: __________________________________________________________

Names of children you wish to enroll: Grade:

_________________________________ _____
_________________________________ _____
_________________________________ _____
_________________________________ _____
_________________________________ _____
_________________________________ _____

Enrollment is $20 for first child, $10 for each additional child; scholarships are available. This program is sponsored by the nonprofit group Science Resources. Please make checks payable to "Science Resources" and mail to:

Robert Styer, 1411 Delmont Avenue, Havertown, PA 19083.
Phone 610-896-0908, email robert.styer@villanova.edu
http://www.homepage.villanova.edu/robert.styer/MathOlympiads/index.html