



North Carolina Destination Imagination Western Region Tournament Registration

School Name: _____ Team Number: 127-_____		
Team Name: _____		
Challenge: ___ A: Direct Deposit ___ B: DI-BOT ___ C: You're Gonna Flip ___ D: DO or DI ___ E: Breaking DI News ___ Rising Stars Weighty News ___ projectOUTREACH Band Together (only available to Middle and Secondary Level Teams)	Level: ___ Elementary (K-5 th Grade) <i>or no member age 12 by 6/15/10</i> ___ Middle (6 th -8 th Grade) <i>or no member age 15 by 6/15/10</i> ___ Secondary (9 th -12 th Grade) <i>or no member age 19 by 6/15/10</i>	
Team Information:		
Team Member	Date of Birth	Grade
If your Rising Stars team has more than 7 members check here and list additional members on back of form _____		
Team Manager	Phone	EMail
Special Considerations: Please include information such as a Team Manager with more than one team (list additional team information) or a team member or manager with physical disability. If you need special scheduling consideration please be specific about the reason. We will do our best to schedule accordingly, but cannot be expected to work around other extra-curricular activities. Please be specific about your needs. _____ Check here and list special consideration needs on back of form.		
Appraiser Information: Each team is required to provide at least one appraiser. Appraisers must be willing to attend training (we will work around their schedules as much as possible) and be available to help all day on tournament day. Name: _____ Email: _____ Phone: _____ Address: _____ If you can provide more than one volunteer please list additional information on back. Thank you!		

Return this form along with \$40 tournament registration fee by February 18, 2010 to Cynthia Kirby 3824 Mooreland Farms Road Charlotte, NC 28226. Make checks payable to North Carolina Destination Imagination.