



## MEMBERSHIP FORM

**CHECK ONE:**  **Division B (Grades 6-9)**     **Division C (Grades 9-12)**

Teacher/Coach \_\_\_\_\_  
School \_\_\_\_\_  
School Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
School Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
E-Mail Address \_\_\_\_\_  
Best Time To Reach You At School \_\_\_\_\_

### CHOOSE AN OPTION BELOW:

**REGULAR ANNUAL MEMBERSHIP** I plan to enter a team from my school in the 2018 South Carolina Science Olympiad. I have enclosed a check for \$90 to cover registration fees on both the state (\$30) and national (\$60) level.

**FREE STATE MEMBERSHIP (FOR SCHOOLS NEW TO THE PROGRAM)** My school would like to be a **FIRST-TIME participant** in the Science Olympiad program. I understand that if my membership is one of the first five received **by November 30, 2017** from first-time participating schools, **my \$30 STATE registration fee will be waived**. I am sending no state fees at this time, **but I have included a check for \$60 to cover my national registration fees**. Should my registration **not** be one of the first five new registrations received by the specified deadline, I understand that I will be billed for the state fee.

- Make checks payable to **South Carolina Science Olympiad**
- Please return this form to:  
Bret Clark, Director  
South Carolina Science Olympiad  
Newberry College  
Newberry, SC 29108

Visit our website at [www.newberry.edu/scscienceolympiad](http://www.newberry.edu/scscienceolympiad)