

Florida Odyssey of the Mind  
2009 - 2010 GULF COAST REGIONAL TOURNAMENT

**WORKER FORM**

Please print neatly in dark ink or type.

I, (*print name*) \_\_\_\_\_ represent a team from (*school*) \_\_\_\_\_  
\_\_\_\_\_, Membership # \_\_\_\_\_, competing in Division \_\_\_\_\_, (*problem name*) \_\_\_\_\_, and I agree to volunteer for a two-hour shift on  
**Saturday, February 27, 2010, at River Ridge Middle/High School.**

I can be reached at:

address: \_\_\_\_\_ city/zip: \_\_\_\_\_

day phone: ( ) \_\_\_\_\_ evening phone: ( ) \_\_\_\_\_ fax: ( ) \_\_\_\_\_

I am \_\_\_\_\_ 18 + or \_\_\_\_\_ age 16 or 17 (mark one)

I would prefer to work in the following position: (circle one)

registration/information    sales    food/hospitality    door monitor  
games booth    set-up Friday night: 4:00 – 6:00pm or 6:00 – 8:00pm  
other: \_\_\_\_\_

My past Odyssey experience includes: \_\_\_\_\_

*I understand that even though I might not receive my final official assignment until the competition day, it is my responsibility to arrive at the officials' check-in before my designated time. I acknowledge that if I do not uphold my obligation, the above team **will** be assessed a \$50.00 fine and also may receive a 25 point administrative penalty.*

(*Signed*) \_\_\_\_\_

**Director's note:** Every effort will be made to allow a worker to see a family member perform. List on the back of this form all other teams with which you are affiliated.

**Information for the Coordinator:**

This form is for your information; it is NOT to be sent to the regional director. Use the information gathered to complete the ONLINE registration of this worker at [www.floridaodysseyofthemind.org](http://www.floridaodysseyofthemind.org) NO LATER THAN DECEMBER 15, 2009. Give a copy to the worker. **PLEASE NOTE:** ALL WORKERS REGISTERED WILL BE SCHEDULED; PLEASE DON'T REGISTER MULTIPLE WORKERS FOR A TEAM AS A "BACK-UP" IN CASE ONE OR MORE DON'T SHOW. ANY WORKER SCHEDULED WHO DOESN'T SERVE WILL EARN A PENALTY FOR THE TEAM.