

REGISTRATIONS WILL NOT BE ACCEPTED AFTER **JANUARY 15, 2025.**

Membership Information			
Membership Name			
Membership #			
Contact Person		Phone #	( )
Email			
Tournament Fees			
Number Of Teams		X \$100 Per Team	
Total Payment			

Enclose a check made payable to: **E.C. Odyssey of the Mind – PA**

Mail this form and payment to:

**ECPA Odyssey of the Mind  
C/O Lynn Fyfe  
50 Ridings Way  
Lititz, PA 17543**

If you have questions concerning your membership, please contact **Lorraine Lowrie** at [regionaldirector.ec@paodyssey.com](mailto:regionaldirector.ec@paodyssey.com)