

Mathematical Olympiads for Elementary & Middle Schools

2154 BELLMORE AVENUE BELLMORE NY 11710-5645
PHONE: (516) 781-2400 FAX: (516) 785-6640

E-MAIL: office@moems.org

WEB SITE: www.moems.org

Dear Educator,

Thank you for your interest in MOEMS®, the MOEMS contests, and the MOEMS philosophy of learning math through problem solving.

REQUIREMENTS FOR INSTITUTE TEAMS

By definition, a MOEMS® Institute Team is one which is comprised of students from one or more schools that do not themselves have a MOEMS team at the same level (Division E grades 4-6, Division M grades 6-8). A team of this type may be run out of a storefront, weekend, or after-school learning center for the purpose of exposing students to MOEMS Contests and/or giving them a chance to experience MOEMS despite the fact that their school does not participate.

Only schools, not individuals, may enroll in the Math Olympiads. However, if a group of students attend an Institute that meets regularly outside of school hours, then the Institute may enroll teams providing it identifies itself to us as an Institute Team and it agrees to observe the following special rules, which are in addition to our general rules.

- The name of the institute team must include the word "Institute".
- If a student's school participates in the Math Olympiads, the student may **not** be a member of the Institute team, whether or not the student is on the school team. It is the responsibility of the supervisor of the Institute Team to actively ensure that all team members comply with this condition. Note that this precludes a student choosing to participate on an Institute Team instead of his/her school team when one exists. This also precludes a student denied membership in the school team because of an entrance exam, the contest year being already in progress or over-subscribed, or any other similar circumstance.
- The regular MOEMS application and payment must be accompanied by a completed Supplemental Application for Institute Teams and a form (page 3 from this packet) for each student completed and signed by the administrator of the attending school.
- Students are eligible for all MOEMS Individual Awards. However, Institute Teams are NOT eligible for any MOEMS Team Awards, since these teams have the capability of an unfair advantage over single school-based teams.

If you have any questions please feel free to call. I await your application, which may be e-mailed to office@moems.org or faxed to 516-785-6640 so that a decision could be rendered based on the merits of that document.

Sincerely

Nicholas J. Restivo

Executive Director MOEMS®

Mathematical Olympiads for Elementary & Middle Schools

SUPPLEMENTAL APPLICATION FOR INSTITUTE TEAMS

1. CONTACT PERSON: _____ E-MAIL: _____

2. INSTITUTE TEAM ORGANIZATION NAME: _____

URL of Website: _____

3. TYPE OF ORGANIZATION SPONSORING THE TEAM (CHECK ONE):

AFTER SCHOOL CENTER LOCATED IN A SCHOOL BUILDING

PRIVATELY-RUN AFTER SCHOOL/WEEKEND ACADEMY

OTHER: *EXPLAIN*: _____

4. WHICH CONTEST WILL YOUR TEAM BE UTILIZING THIS YEAR? MOEMS® ONLINE MOEMS® ONPAPER

A. IF MOEMS® ONLINE, PLEASE PROVIDE YOUR MOBILE TELEPHONE NUMBER:

_____ - _____ - _____

(IF USING THIS OPTION, YOU MAY SKIP QUESTION B)

B. IF MOEMS® ONPAPER, WHERE WILL YOUR SESSIONS BE HELD?

NAME OF HOME OR BUSINESS: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

5. PICO'S NAME (IF DIFFERENT FROM CONTACT PERSON ABOVE): _____

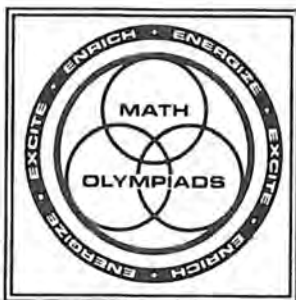
6. PICO'S PHONE NUMBER: _____ PICO'S E-MAIL: _____

7. WILL THE PARENTS/GUARDIANS OF THE STUDENTS PAY A FEE TO BE PART OF YOUR MOEMS® PROGRAM?

YES

NO

PLEASE NOTE THAT EACH STUDENT ON YOU INSTITUTE TEAM IS REQUIRED TO GET THE ATTACHED RELEASE FORM SIGNED BY A PRINCIPAL, HEADMASTER, OR APPROPRIATE ADMINISTRATOR FROM THEIR BUILDING.



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Date: _____

RE:

Student's Name _____ Grade _____

Name of School _____

City or Town _____ State _____

Dear School Administrator,

The student named above has expressed an interest of participating in MOEMS® (Mathematical Olympiads for Elementary & Middle Schools) Contest program for the current school year. In order for him/her to register for our team, we must first confirm that he/she does not attend a school in which a MOEMS® team exists. Our team is labeled as an "Institute Team," and as such we must confirm with MOEMS® that this student is not attending a school that fields a team. Your signature below will confirm that fact.

Please check the appropriate box below. Then print, sign and date on the lines provided.

This school **DOES NOT** have a MOEMS® team for the 2022 - 2023 school year.

This school **HAS** a MOEMS® team for the 2022 - 2023 school year. (Check all that apply below):

This school has a Division E (grades 4 - 6) team competing in MOEMS® for the 2022 - 2023 year.

This school has a Division M (grades 6 - 8) team competing in MOEMS® for the 2022 - 2023 year.

Name/Title of Administrator: (Print) _____

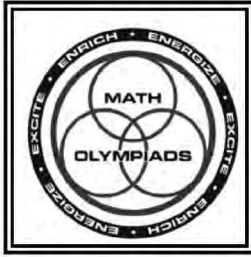
Signature: _____ Date: _____

Thank you for continuing to support your student's interest in mathematics and problem-solving. If you have any questions or comments, please feel free to call me.

Sincerely,

Name of Institute

e-mail



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2022 - 2023 Enrollment Form

School Information

School Name: _____

Type (Select ONLY one): Public Private/Parochial

DODDS Home School Charter District InSTITUTE

Street Address: _____

City: _____ State/Province: _____ ZIP: _____

Phone #: (____) _____ Mobile: (____) _____

*PICO's Name: _____

PICO's E-mail Address: _____

@ _____

District Information

THIS SECTION MUST BE COMPLETED IF TEAM(S) WILL BE FUNDED BY THE SCHOOL DISTRICT BUSINESS OFFICE.

District Information

Name: _____

Street Address 1: _____

Street Address 2: _____

City: _____

State/Province: _____ ZIP: _____

Phone #: (____) _____

*PICO IS OUR ACRONYM FOR THE PERSON IN CHARGE OF OLYMPIADS

TEAM (S) INFORMATION & PAYMENT OPTIONS

Number of Teams in Each Division: _____ Division E (Grades 4 - 6) _____ Division M (Grades 6 - 8)

Method of Payment: Check # _____ Purchase Order # _____

Credit Card: VISA MasterCard Discover American Express

Credit Card # _____ Expires: ____/____ Security Code: _____

<u>Membership Fee per Team</u>	<u>"Early Bird" Fee</u> FULL PAYMENT by <u>July 8, 2022</u>	<u>"Standard" Fee</u> July 9 through <u>October 15, 2022</u>	<u>"Late" Fee</u> October 16 through <u>October 31, 2022</u>
USA ZIP Codes only	\$109 USD	\$150 USD	\$170 USD
International	\$125 USD	\$180 USD	\$205 USD
FOR "EARLY BIRD" RATE, WE MUST RECEIVE A CHECK (DATED ON OR BEFORE July 8, 2022) OR CREDIT CARD INFORMATION BY July 8, 2022.			
PURCHASE ORDERS FOR "EARLY BIRD" RATE WILL ONLY BE ACCEPTED IF ACCOMPANIED BY A CHECK DATED ON OR BEFORE July 8, 2022.			
TOTAL AMOUNT ENCLOSED: \$ _____ FOR _____ TEAM(S)			

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Purchaser's Signature (REQUIRED) indicates agreement with above statement: _____

Make PO or payment payable to:

MOEMS [Teams Outside of the USA must use credit cards]

Mail or fax this form with PO or Payment to:

Nicholas J Restivo - MOEMS

Invoice Payment Terms: Net 30

2154 Bellmore Avenue

Bellmore NY 11710-5645

Refunds are granted only to schools that withdraw prior to October 15, 2022.

A Team consists of 35 or fewer students. A Team with any members in grades 7 or 8 must be in Division M.

Only fulltime registered students from the same member school or homeschool are eligible to receive Team Awards.

District and Institute teams are not eligible for Team Awards.