



Mathematical Olympiads for Elementary & Middle Schools

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# Enrollment Form 2023-2024

School Name: \_\_\_\_\_

Team Classification (Circle one): Public Private Parochial Institute DODDS Home School District

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

School Phone: (\_\_\_\_) \_\_\_\_\_ PICO's Mobile: (\_\_\_\_) \_\_\_\_\_

PICO's Name \_\_\_\_\_ PICO's email address: \_\_\_\_\_

**District Information: (This section MUST be completed if funding is from a School District Business Office)**

District Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Accounts Payable Phone: (\_\_\_\_) \_\_\_\_\_ Accounts Payable email: \_\_\_\_\_

**Number of Teams in each Division: (35 student maximum per team)**

\_\_\_\_\_ Division E (grades 4-6) \_\_\_\_\_ Division M (grades 6-8)

Fee per Team:	Early Bird Fee	Standard Fee	Late Fee	Last Chance
<i>Invoice Payment Terms: Net 30</i>	<i>Full payment by 7/31/23</i>	<i>Full Payment by 10/15/23</i>	<i>Full Payment by 10/31/23</i>	<i>Full Payment after 11/1/23</i>
USA/Canada/Mexico	\$175.00	\$200.00	\$250.00	\$300.00
International	\$215.00	\$240.00	\$290.00	\$340.00

Payment (Choose One) Check  Purchase Order  Visa  Master Card

Check # \_\_\_\_\_ PO# \_\_\_\_\_

Credit Card # \_\_\_\_\_ Expiration: \_\_\_\_\_ Security Code \_\_\_\_\_

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

**Refunds only granted prior to October 15, 2023. After October 15 and prior to the release of the first Olympiad credit is given for the following year. After the release of the first Olympiad – NO REFUNDS WIL BE GIVEN.**