



PLEASANT UNION ELEMENTARY SCHOOL

Return #

ODYSSEY OF THE MIND

Student's Name _____ Track _____ Phone # _____ e-mail _____

I would like to be assigned to an Odyssey Team. I am making a commitment to attend practices and participate with a positive attitude.

*I am available to practice on the circled days. Student Signature _____

M T W Th F Sa Su Parent Signature _____

PARENT COACHES!

I would like to co-coach an Odyssey of the mind Team this year!

Name _____ Phone _____ E-mail _____

Please join us for our first coaches meeting on **September 20th at 10:15AM.**

If you have questions, please ask! hbrletic-shiplew@wcpss.net



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