



**MN Academy of Science**  
8700 W. 36th Street, Suite 114W  
St. Louis Park, MN 55426

**952-545-6789**  
952-545-6336 fax  
[www.mnmas.org](http://www.mnmas.org)

## Invoice/Purchase Order

**School/Team:** \_\_\_\_\_  
**Coach:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_  
**Email:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City/Zip:** \_\_\_\_\_

### MN Regional Science Bowl

# of Teams	Fee per Team	Total Due
	\$150	

**Payment due upon receipt**  
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**There will be a \$50 late registration fee per team if the registration is not received by**  
**12/15/09 for High School teams**  
**1/15/10 for Middle School teams**