# GCTM
# Middle School Math Tournament
# Information
# April 18, 2015

It will be held at Thomson Middle School.
301 Thomson Road, Centerville, GA 31093-8940.
*(Please do not mail your registration form or your registration fee to this address. Email the registration form to* poolp@bellsouth.net *and the registration fee and/or questions will be collected on-site the day of the tournament.)*

## Schedule

| | |
|---|---|
| 9:15 – 9:50 | Registration |
| 9:30 | Game Activity |
| 10:00 – 10:50 | Written Test |
| 11:00 – 11:40 | Individual Ciphering |
| 11:40 | Pizza Party (Free) |
| 12:00 – 12:20 | Pair Ciphering |
| 12:45 – 1:00 | Power Question |
| 1:05 – 1:30 | Fright'ning Light'ning |
| 1:30 | Awards |

## Description of Events

**Written Test:** 30 questions, 45 minutes, done individually, no calculators (5 point each, no penalty for guessing = 150 points * Top 4 team members = 600 maximum).

**Individual Ciphering:** 10 questions, done in 1 and 2 minute time intervals, no calculators (10 points & 5 points per question = 100 points * Top 4 team members = 400 maximum).

**Pair Ciphering**:** 3 rounds of 4 questions worked in pairs, 2 and 4 minute time intervals (10 points & 5 points per question = 120 * 2 pairs = 240 maximum).

**Power Question**(Modeling): 1 multi-part question worked by entire 4 member team, done in 2, 4, 6, 8, and 10 minute time intervals (worth 100-80-60-40-20 points).

**One calculator per pair of students, non-symbolic manipulator (TI-84 and below) for pair ciphering and power question.

**Fright'ning Light'ning Round:** each student will answer one round of the oral relay. Time limit: a frightening 30 seconds. (Worth sweet treats).

One team of four students is permitted per school.
Only one calculator will be needed for each pair of students (2 per team).
This is a **FUN** tournament! Your students are certain to enjoy the day.

***APPLICATION***
**GCTM MIDDLE SCHOOL**
**MATH TOURNAMENT**

**SATURDAY, APRIL 18, 2015**
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***Non-GCTM member registration:***
*5 questions and $10 or $20 (To be paid on Saturday at the check-in table)*
***GCTM member registration:***
*5 questions or $10 (To be paid on Saturday at the check-in table)*

**School Name:** Click here to enter text.

**School Address:** Click here to enter text.

**School Phone:** Click here to enter text.

**Fax:** Click here to enter text.

**Sponsor's Name:** Click here to enter text.

**Sponsor's Address:** Click here to enter text.

**Sponsor's e-mail:** Click here to enter text.

**Sponsor's Cell Phone:** Click here to enter text.
*(This information is so we may reach you should something happen that morning.)

**Is Sponsor a member of GCTM?** Choose an item.