



Student Information (Please Print Clearly)

Student Name: _____ Date of Birth: _____

Home Phone: _____

Cell Phone (optional): _____ Text? Yes or No

E-mail Address (optional): _____

School: _____ Grade: _____

Parent/Guardian Information

Parent/Guardian Name: _____

Parent/Guardian Cell Phone: _____ Text? Yes or No

Parent/Guardian Email: _____

Address: _____

City: _____ State: _____ ZIP: _____

Best way to reach you: _____

Parent/Guardian Occupation: _____

Parent/Guardian Place of Work: _____

Student T-Shirt Size (please circle): 10-12 14-16 Sm Med Lg XL 2XL

Dietary or Other Restrictions: _____

(Attach a separate paper if more space is needed.)

This registration form is for South Jersey Robotics FIRST Tech Challenge teams. Completion of this form and the payment of \$75 made payable to South Jersey Robotics ensures your commitment to the 2017-18 season. There is a maximum of 12 students per team. South Jersey Robotics is committed to organizing as many teams as needed to promote science and technology in South Jersey. The program will officially begin the last week of August 2017, however, some teams are already gathering. The students will work with coaches to design, build and program a robot to complete this year's challenge. The competition season runs from fall to March, schedule to be determined. Each student is expected to participate in ALL scheduled events as well as ALL fundraising events including the Robot Run Oct. 14, 2017. Each student is expected to raise \$300 BEFORE December 1st as well as help the team meet its team fundraising goal of \$1,000. Events to fundraise as a team to be determined.

Please mail this form and your registration fee to:

South Jersey Robotics • PO Box 753 • Swedesboro, NJ 08085

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

For Administrative Use Only	
Payment _____	Assigned to Team _____
Added to distribution list _____	Team Leader _____