

## FIRST Tech Challenge (FTC!)

## Individual Application

CONTACT INFORMATION			
Applicant Name			
Date of Birth Tro	pop#		
Phone E-mail			
Address	City		Zip Code
Girl Scout Level: ☐ Cadette ☐ Senior	☐ Ambassador		
Parent/Guardian Name			
Parent Phone (if different from above) Pa	rent E-mail (if different from above)		
APPLICATION			
attach a separate page or write on the back of this	s one if necessary, but please keep your re	esponse to	500 words or less.
Please select all that apply:			
☐ I would like to join the veteran FTC team Rock N Roll Robots and can attend meetings in the San Gabriel Valley ☐ I would like to start a new team in my local area			
I understand that as a participant in FIRST Tech Challenge (FTC), I will be required to attend at least 90% of team functions – including team meetings to design, build, and program the robot, and tournament(s) – during the robotics season.			
Applicant's Signature			Date
I have read the 2016-17 FIRST Tech Challenge (FTC) Info Sheet and understand the commitment my daughter will be making and the support I will be required to provide. My daughter has my permission to participate.			
Parent/Guardian's Signature			Date
Are you willing to act as coach for your daughted Are you willing to act as mentor for your daugh		□Yes □ Yes	□ No □ No