

FIRST Tech Challenge (FTC)!

Team Application

Team Status: LI Returning Team	1 (\$250 per team)	team)
SE	ECTION 1: TEAM CONTACT INFORMATION	
Coach Troop #	Coach Name/T-Shirt Size:	
Phone	E-mail	
Address	City	Zip Code
Co-Coach's Name/T-Shirt Size	Mentor Name/T-Shirt Size:	
Phone	E-mail	
Girl Scout Level(s): ☐ Cadette	☐ Senior ☐ ☐ Ambassador Grades 7-12 o	nly!
# of girls on team :	(minimum 3, maximun	n 10)
* Please remember to have the correct adult	to girl ratio for meetings and events, in compliance with Vol	lunteer Essentials, page 31: Safety-Wise.
SECTION 2: TEAM MEMBER INFORMATION		
Name of Girl 1.	T-Shirt Size Troop #	Date of Birth
2.		
3.		
4.		<u> </u>
5. 6.		
7		
8.		_
9.		
10		<u> </u>
SPECIAL NEEDS INFORMATION		
☐ Wheelchair Accessibil	ity ☐ Sign Language Interpreter ☐ Ph	ysical Assistance
☐ Other:		
	ullenge (FTC) Info Sheet and understand the comformy team's fulfillment of the program require	
Coach's Signature		Date
PAYMENT METHOD		
☐ Cash ☐ Check #:	☐ Credit (circle one): Visa MC D	Discover AMEX
Card #:	Exp. Date:	Amount: \$
Name on card:	Signature	
	(Must sign or ind	icate e-signature OK)