

FIRST LEGO League Junior (FLL-Jr)!

Individual Application

	CONTACT INFORM	ATION		
Applicant Name				
Date of Birth	Troop #			
Phone	E-mail			
Address		ity		Zip Code
Girl Scout Level: ☐ Daisy	☐ Brownie	□ Ju	nior	
Parent/Guardian Name				
Parent Phone (if different from above)	above) Parent E-mail (if different from above)			
	APPLICATIO			
I understand that as a participant in FIRST L	EGO League Junior (FLL:	Jr)!, I will be required t	to attend a	t least 90% of team
functions – including team meetings to desi	•	•		
Applicant's Signature				Date
I understand the commitment my daughter has my permission to participate.	will be making and the	support I will be requi	red to prov	ide. My daughter
Parent/Guardian's Signature				Date
Are you willing to act as coach for your da Are you willing to act as mentor for your	~		□Yes □ Yes	□ No □ No