

Connecticut **First Lego League**

REGISTRATION FORM *(COMPLETED FORM REQUIRED AT CHECK-IN)*

Connecticut Regional FLL Competition, Central Connecticut State University

DATE _____

TEAM NUMBER _____ TEAM NAME _____

ADVISOR NAME _____

ADVISOR ADDRESS _____

ADVISOR PHONE _____ EMAIL _____

SCHOOL/AFFILIATION NAME & ADDRESS _____

TEAM MEMBER'S NAMES (10 MAXIMUM)

1. _____ GRADE _____

2. _____ GRADE _____

3. _____ GRADE _____

4. _____ GRADE _____

5. _____ GRADE _____

6. _____ GRADE _____

7. _____ GRADE _____

8. _____ GRADE _____

9. _____ GRADE _____

10. _____ GRADE _____

REGISTRATION FEE (\$50.00)

DATE PAID _____