Capstone Expo – Facilities Information

Event Date: April 25, 2013

Team Name:		
Description of Your Invention:		
Invention Needs Power: Yes	No	
Invention Has: (Select all that apply; leave blank if none)		
Fire Smoke	Heat	
Circ of Invention		
Size of Invention:		
Table Top Floo	r Set-up	
Most Octors becaution to decree	V N-	
Must Set-up Invention Indoors:	Yes No	
If Yes, Please give reason(s) why:		
Must Set-up Invention Outside:	Yes No	
If Yes, Please give reason(s) why:		
Provide any additional facilities note	e·	
i rovido diriy additional lacilitico ficto	J.	