Robotics Academy

Registration Form

ROBOTICS ACADEMY REGISTRATION FORM

This registration form and fees are due by June 10, 2016 (May 25, 2016 is the deadline for early registration)

ST	UDENT'S NAME <u>:</u>	AGE <u>:</u>	GRADE LEVEL (FALL 2016):	
PARENT'S NAME(S):		PHONE N	PHONE NUMBER:	
ΑĽ	DDRESS:	CELL NU	MBER:	
	MAIL ADDRESS: nergency Contact Information:_	WORK N	UMBER:	
1.	Contact Name:	Relationship:	Number:	
2.	Contact Name:	Relationship:	Number:	
3.	Contact Name:	Relationship:	Number:	
4.	List any other important Information you can provide: (Ex: allergies-medication, food, insect stings etc.), an medical conditions ex: epilepsy, heart conditions, seizures, asthma etc. This information does not affect enrollment, it is necessary to have on hand for emergency purposes.			

Email completed Registration form to: asks10409@aol.com or mail completed form with payment to: Robotics Academy, 28151 Suburban, Warren, MI 48088

Certified Checks or Money Order made out to Sharon Sylvester.



Who will pickup?

How will your student get home after class? If you plan to have your child go home from Robotic Academy class with another adult, you must preauthorize that adult in writing prior to the start of class. Students will only be released to persons 18 years or older. If you plan to have your child walk or bike home from class, you must give written notice prior to the start of class.

 Parent will pickup
After school care
Ride bike or walk hom
Preauthorized adult

Robotics Academy Overview

Classroom teams allow students to work with the Lego EV-3 robots and solve robotics missions. We will learn to program using Lab View programming in order to make our robots follow the commands we want them to follow.

Robotics Prerequisites

None

Questions?

Contact Sharon Sylvester, Robotics Academy Instructor, via email at: asks10409@aol.com

