

2013 International Autonomous Robot Competition (iARoC)

Reuben H. Fleet Science Center, San Diego, June 29th and 30th, 2013



Category Entered

Team Name

Team Leader

Name:

Age/School Grade:

Street:

City/State:

Phone:

Zip:

Email:

Responsible Adult If team leader is younger than 18

Name:

Age/School Grade:

Street:

City/State:

Phone:

Zip:

Email:

Team Member #2

Name:

Age/School Grade:

Street:

City/State:

Phone:

Zip:

Email:

Team Member #3

Name:

Age/School Grade:

Street:

City/State:

Phone:

Zip:

Email:

Team Member #4

Name:

Age/School Grade:

Street:

City/State:

Phone:

Zip:

Email:

Team Member #5

Name:

Age/School Grade:

Street:

City/State:

Phone:

Zip:

Email:

Method of payment for competition entrance fee - \$500

☐ Check/Money Order payable to Wintriss Technical Schools

Please charge my: ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Card Number _____

Expiration Date _____ month/year Card Code _____

Name as it appears on card _____ Signature _____

Billing address _____

Please mail competition registration form and entrance fee to:

Wintriss Technical Schools
Post Office Box 910471
San Diego, CA 92191-0471

I hereby agree to abide by all iARoC 2013 competition rules. In addition, I release any and all rights I have to photographic images taken during the contest period, and give consent for the use of these images, without royalty by Wintriss Technical Schools, Inc.

Name of Responsible Adult _____

Signature of Responsible Adult _____



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