***FIRST*® LEGO® League – 2019 Application**

Applications Preferred by 7/27/2019 * Notified of Acceptance by 8/3/2019 * Practices Start Immediately

Contact Information (Applicant encouraged to complete the form, please print clearly)

Applicants Name:_____ Nickname:_____

Age as of 1/1/2019:_____ DOB:_____ Applicant Identifies Their Gender As (preferred pronoun):_____

Short-Sleeved T-Shirt Size (Youth XXS- Adult 3XL):_____

Applicants Address:_____ City:_____ State:_____ Zip:_____

Applicant Home Phone:_____ Applicant Cell Phone:_____

Applicant Email:_____

School:_____ Grade in Fall:_____

Parent 1/Guardian Name:_____

Parent 1 Home Phone:_____ Parent 1 Cell Phone:_____

Parent 1 Email:_____

Parent 2/Guardian Name:_____

Parent 2 Home Phone:_____ Parent 2 Cell Phone:_____

Parent 2 Email:_____

Have you ever been on a *FIRST*® LEGO® team?: □ Yes □ No
If so, when and where?:_____

FIRST*® LEGO® (FLL) is a Team activity, and participation at practices is essential to success, so members are asked to avoid missing practices; excessive absenteeism from regular practices may result in dismissal from the team without a refund. FLL is a year round activity. Practices are scheduled to begin late in July, and the normal meeting schedules (twice a week for 4-5 hours total typically) will be determined at a later date by the coaches, plus extra (optional) days as workload dictates (especially closer to competition). Regular season dues tentatively set at $100 (plus STEAM ON membership, includes team shirt); with cost dependent on team sponsorships; scholarships available. Attendance at Competitions is required; Regionals are typically first or second Saturday of December (TBD), and State will be in Ames, IA, often a weekend day in mid-January (if team qualifies; date TBA). World Competition in Detroit, MI, at the end of April (if team qualifies; date TBA); other competitions by invitation.

Can you commit to the schedule above? □ Yes □ No

What days of the week and times do you prefer for practices?

_____

Please complete and submit all sides (total of 3) of the application.

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*Using additional paper, if needed, so that it is clearly written **by the applicant**, please answer the following questions:*

Q1. Please write a few sentences stating why you want to be a part of this team and how you would contribute to it.

Q2. Please list/tell us about your interests, hobbies, and talents. Have you ever been part of a school project or participated in science fairs or team projects? What topics did you explore?

Q3. Briefly describe the good things you bring to a team from your past experiences as a part of a team in school or in another youth organization or sport:

Q4. Is there anything else you would like to share with us? If so, please explain:

Are you willing to dedicate 3-5 hours per week between September and December (or more) to work with your team in learning and programming the LEGO® EV3 Robot to complete the tasks required in the Challenge? □ Yes □ No

Are you willing to share ideas, listen, and thoughtfully consider the ideas of others, and collaborate? □ Yes □ No

Are you willing to do research and prepare a presentation that will be given to community leaders? □ Yes □ No

I will treat my teammates and fellow FLL participants with disrespect and not listen to their ideas. □ Yes □ No

Do you understand that *FIRST*® LEGO® League (FLL) is more than just robotics and that if accepted you will be asked to do research and other development for a project/ presentation? □ Yes □ No

I verify with my signature that all information on my application is correct.

Applicant Signature:_____ **Date:**_____

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Parent/Guardian: Please read, sign, and date below:

My child, _____, has my permission to apply for the ***FIRST*® LEGO®** League Team sponsored by STEAM On. I understand that is important that my child attends all the meetings and I will arrange transportation to and from each meeting.

Photo Release: Do you give permission for your child's likeness in photos/video to be used by the Team, STEAM On or ***FIRST*®**, for: promotions, publications, presentations, websites, social media, and the public media? You will not receive compensation.

□ Yes □ No _____Parent/Guardian Initials

Allergy Info:

My child □ does □ does not have allergies (food, bee stings, etc.) _____Parent/Guardian Initials

Please Specify allergy, treatment, comments:_____

I verify with my signature that all information regarding my child is correct.

Parent Signature:_____ Date:_____

Please return completed form to STEAM On in one of the following ways:

Mail (business office):
STEAM On % Shelley Kamp
4041 Shady Oak Drive
Marion, Iowa 52302

Email / Scan - Preferred:
info@STEAMOn.net

Teams hosted in several Metro area locations. Scholarships are available. Please ask for details.

QUESTIONS? Contact STEAM On Team Coordinator, Shelley Kamp: 319-298-8882 / Info@STEAMOn.net

Please complete and submit all sides (total of 3) of the application.