



FIRST ROBOTICS TEAM 2064

Student Application for Membership

Application Process

- **Team Dues \$50.00 - Cash or Check Written to: Pomperaug Regional High School - Covers cost of Team Shirt and helps support cost of food on weekend meetings.**
- Each team member will be responsible for filling out an application to be on the team.
- Students who have not submitted a complete application will be not be allowed at team or sub-team meetings after the due date.
- Applications are reviewed by mentors and will be subject to verification before students are admitted.
- Please return your application as soon as possible, but no later than the last Wednesday in September.
- Interview Process: You will be notified soon after about whether you will be interviewed for membership. We hope to have all new members on board by mid-October.
- Meetings will be scheduled in October for new parent and new team member orientation.
- You need to attach the following, as described below, to your application:
 - Application Questions (Page 2)
 - Parent Permission (Page 3)
 - Data and Recruitment Form (Page 4)
 - Signed Expectations and Code of Conduct Form(Page 5)
 - 1 Letters of Reference (Page 6)

Thank you for taking the time to apply for the FIRST Robotics Team 2064.

Student Application for Membership

Return application to Mr. Marganski or high school office indicating Mr. Marganski, or be postmarked by the last Friday in September to: Brian Marganski: 234 Judd Rd, Southbury CT, 06488

Name: _____ Age as of the last Friday of Sept: _____
 Address: _____ Current Grade Level: 9 10 11 12
 _____ Home Phone: _____
 Email: _____ Cell Phone: _____

Emergency Contacts (Please list 3 ---- 2 of them can be parents/guardians)
 Contact 1 Name: _____ Home Phone: _____
 Address: _____ Cell: _____
 Place of Work: _____ Work Phone: _____

Contact 2 Name: _____ Home Phone: _____
 Address: _____ Cell: _____
 Place of Work: _____ Work Phone: _____

3rd Emergency Contact:
 Contact 3 Name: _____ Home Phone: _____
 Address: _____ Cell: _____
 Place of Work: _____ Work Phone: _____