



## **Lego Robotics: Valley Middle School Eagles**

### **Team Member Info**

*All fields must have text in them for the form to be properly submitted. Please input "NA" (not applicable) instead of leaving a field blank.*

**First name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**Nickname:** \_\_\_\_\_

**Grade:** \_\_\_\_\_

**Parent or guardian's name(s):**

\_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Parent's Cell Phone:**

\_\_\_\_\_

**Student's Cell Phone:** \_\_\_\_\_

**Parent's Email:**

\_\_\_\_\_

**Student's email (if applicable):** \_\_\_\_\_

**Date of Birth (MM-DD-YYYY):** \_\_\_\_\_

**How will you get home from meetings?** \_\_\_\_\_

\*\*\*Would either of your parents be interested in Mentoring (helping design, build, program, etc)? If yes, please contact Mr. Podmers

**I have read the information in the packet and understand the expectations and responsibilities for The VMS Robotics Team:**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent/Guardian Signature