

2015 International Autonomous Robot Competition (iARoC)  
Reuben H. Fleet Science Center, San Diego, June 27th and 28th, 2015



Category Entered  Team Name

Team Leader

Name:	Age/School Grade/T Shirt Size:
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/T Shirt Size:
Street:	City/State:
Phone:	Zip: Email:

Team Member #3

Name:	Age/School Grade/T Shirt Size:
Street:	City/State:
Phone:	Zip: Email:

Team Member #4

Name:	Age/School Grade/T Shirt Size:
Street:	City/State:
Phone:	Zip: Email:

Team Member #5

Name:	Age/School Grade/T Shirt Size:
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 2015 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.

Name of Responsible Adult \_\_\_\_\_  
Signature of Responsible Adult \_\_\_\_\_ Date \_\_\_\_\_

