To register for **FLL (First Lego League) Robotics** during **IA’s 1st Term (**18-20 classes on Tuesdays & Thursdays from 3:30 -5:00**)**, please complete this form and return it on your child’s first day of class with cash or check for **$300** made out to **Jeff Major**. According to International Lego League Rules, students must be **between the ages of 9-14 years of age** to compete in an FLL tournament. Tournament date TBD sometime in November **Note \*\*\***There is a chance that students will be asked to compete beyond our regional competition which takes place at LEGOLAND in early December and thus extend the classes to approximately 24-26 classes.**\*\*\***

**Student Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/ Guardian Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Phone (\_\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone (\_\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Medical Issues?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

While my child is participating in the **FLL Robotics** at Innovations Academy, I acknowledge all risks on his or her behalf and likewise assume all responsibility for any injury or damages that may occur. I release, discharge and covenant not to sue ­FLL Robotics instructors, other participants, and owners/leasors of premises used to conduct the activities. I have read the above waiver and release and understand that I give up substantial rights by signing it and I sign it voluntarily. I give my permission for my child to be video taped, photographed, and/or interviewed for promotional purposes while attending FLL Robotics practice at Innovations Academy.

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please Print Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**