



# MEMBER CONTACT FORM

The PowerKnights Robotics Team Registration Forms, Contracts & Instructions

Please fill out completely and provide all your contact information, as well as parent/guardian and emergency contacts, Team Shirt size and text/messaging contact preferences.

## Student Information

First Name:	MI:	Last Name:
Street Address:	Home Phone:	
City/State & Zip:	Cell Phone:	
Email:		

## Parents/Guardian

Parent/Guardian1 Name:	Parent/Guardian2 Name:
Street Address:	Street Address:
City/State & Zip:	City/State & Zip:
Home Phone:	Home Phone:
Cell Phone:	Cell Phone:
Email:	Email:

## Emergency Contacts (Other than Parent/Guardian)

Emergency Contact #1:	Emergency Contact #2:
Relationship to Member:	Relationship to Member:
Street Address:	Street Address:
City/State & Zip:	City/State & Zip:
Home Phone:	Home Phone:
Cell Phone:	Cell Phone:

## Member Preferences

Receive Text:(Circle One)    YES    NO	Team Shirt Size: (Circle One)    S    M    L    XL    2XL
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