



STEM Competition Registration Form

2019 CONNECT TRI-CITIES

SCHOOL INFORMATION

High School Name _____

School Address _____

School Phone Number (with area code) _____

COACH INFORMATION

Faculty Coach Name _____

E-mail _____ Phone Number (with area code) _____

TEAM INFORMATION

Team Name _____

Team Member Name 1 _____ Grade Level _____

Team Member Name 2 _____ Grade Level _____

Team Member Name 3 _____ Grade Level _____

Team Member Name 4 _____ Grade Level _____

Team Member Name 5 _____ Grade Level _____

E-MAIL COMPLETED APPLICATION TO Tracy_Desmond@rl.gov

Applications are due midnight September 16.

Space is limited and filled in order of applications received.