River Eves Elementary Student Technology Fair
Registration Form

(Return by Wednesday, October 30, 2019 to the Media Center.)

_____
Student Last Name

_____
Student First Name

_____
Street Address

_____
City

_____   _____   _____
State   **Zip**   **Date Submitted**

Grade Level:

☐ 3rd   ☐ 4th   ☐ 5th   Teacher: _____

Category:

☐ 3D Modeling   ☐ Internet Applications

☐ Animation   ☐ Mobile Apps

☐ Audio Production   ☐ Multimedia Applications

☐ Device Modification   ☐ Productivity Design

☐ Digital Game Design   ☐ Project Programming

☐ Digital Photo Production   ☐ Robotics

☐ Graphic Design   ☐ Video Production

Brief description of your project: _____

If you are entering as a team (limit 2 members), write your team member's information below:

_____   _____   _____
Team Member's Last Name   **Team Member's First Name**   **Grade**

_____   _____
Team Name (if none entered, you will be assigned   **Team Member's Teacher's Name**
         a number, e.g. Team #1, Team #2, etc.)

School Use Only: Date received by Fair Coordinator_____