

2024 AGROBOTICS CHALLENGE TEAM REGISTRATION FORM

O Juni	ior Team	0	Senior Team
Please components.	plete this form and bring it with y	you to the registration tab	le the day of the
TEAM NAME:		TEAM NUMBER (S.A.L.E. will provide this number)	
TEAM ME	MBERS		
	nt the individual/team entry on this for erent Competitive Events Premium I		
Signature:	Coach / AST / CEA / Parent (ple	ease circle one)	
	On-site Contact Cell Phone Number		