

S.P.A.M. FRC TEAM 180

MEMBER CONTACT INFORMATION

STUDENT NAME: _____

SCHOOL: _____

GRADE: _____

E-MAIL ADDRESS: _____

CELL NUMBER: _____

PARENT NAME(S) _____

PARENT E-MAIL ADDRESS(ES) _____

PARENT CELL NUMBER(S) _____

This information will be used to notify you of up-coming S.P.A.M. classes, meetings and events.

PLEASE CHECK ONE OF THE CHOICES BELOW.

_____ Please use my contact information for Board use only.

_____ My contact information can be published in a team roster to be distributed to the team members and their parents.