



Virtual Academy of Lafourche

Robotics Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

VAL SITE: _____ GRADE LEVEL: _____ AGE AND D.O.B.: _____

Parent or Guardian Info

Name: _____ Address: _____

Cell No.: _____ Email Address: _____

Teacher Reference

Please list two teachers that recommend you to be on the team.

Name: _____ Email: _____

Site: _____

Name: _____ Email: _____

Site: _____

TECH or CHALLENGE

The LEGO Challenge Team consists of students in grade 4th - 8th.

The TECH Team consists of students in grade 7th – 12th.

If you are in 7th or 8th grade, please circle the team you would like to join:

TECH or CHALLENGE

Others who are allowed to pickup your child

Name: _____ Cell #: _____

Donations/ Sponsors

We can not be a successful club without the support of the community. Please list anyone you feel would be willing to contribute to our club, with their name and contact info:

PLEASE RETURN TO YOUR SITE ADMIN OR EMAIL TO THE TEAM ADMIN

Wilson A. Lirette II
ROBOTICS ADMINISTRATOR
TECH COACH
WLIRETTE@VALCHARTER.ORG

You will be contacted as soon as dated are available for interviews. Thank you for your interest in VAL Eagle Robotics!

Signature: _____ Date: _____