Roberts Math Team Registration Form

Student's Name (First, Las	Vath Team Information and Region			
Current Grade:	wine un for the 2016, 17 sehentager. The tear	on si men		
Current Teacher:	s who teach and do research in STEM fields. T	ts paren		
Parent's Name (First, Last	provide an activity where students can devel love of math.	ata nous. a bas alli		upport ST roblem-se
Parent's Name (First, Last)):			
Parent's email address:	ende students are cligible to participate on the months of stamina r	on bore di		
Parent's cell phone numbe	er:			
		IT route		
Did the student participate on Roberts Math Team last year?:			Yes	□ No
Does the student participate in other extracurricular math activities?:		nursus) d (🗖 ecti	Yes	□ No
If yes, please describe the a	activity:	nged aso	rat they	neterials th
iplads for Elementary descriptions of	re team will compete in the Mathematical Olym) ************************************	iT (anoiti (MCENT)	em Competi Schools	e Math in lympled
	your child to participate on the Math Team?	n creative bergene i. There a to of five ince limit are subs l provide	engage i kovolvec involvec it consist d bas a t t. result oints and	audren to ill take pr no travel ach contes inkling an ach contes ach contes ach contes
Are you (parent) interested	l in volunteering or getting involved in the Mat	h Team a	nd/or S	ГЕМ
enrichment at Roberts?	☐ Yes, I can help coach/assist at Team me			
	\square Yes, I want to get involved in other STE	M enrich	ment act	ivities

****Please return to your teacher or the front office by Monday, Sept. 26 $^{\rm th}$ ****