

National 4-H Engineering Challenge

Official State Delegation Listing

State of _____

The following named people will constitute our state delegation to the National 4-H Engineering Challenge, October 4-6, 2009, West Lafayette, Indiana. (Please include contestants, coaches, parents, Extension staff, and others representing your state.) In the event names of delegates are not known by September 15, please notify us of the number you expect to attend the workshops and banquet. The head chaperone is to pay registration fees for the entire delegation.

PLACE "X" BY PERSONS PARTICIPATING IN WORKSHOPS AND BANQUET

CONTESTANTS NAMES	ADDRESSES	WORKSHOP	BANQUET
1. _____ (Aerospace)	_____ _____ Telephone: _____	_____	_____
2. _____ (Aerospace)	_____ _____ Telephone: _____	_____	_____
3. _____ (Bicycle)	_____ _____ Telephone: _____	_____	_____
4. _____ (Computer)	_____ _____ Telephone: _____	_____	_____
5. _____ (Electric/Energy)	_____ _____ Telephone: _____	_____	_____
6. _____ (Lawn Tractor)	_____ _____ Telephone: _____	_____	_____
7. _____ (Small Engines)	_____ _____ Telephone: _____	_____	_____
8. _____ (Tractor)	_____ _____ Telephone: _____	_____	_____
9. _____ (Welding)	_____ _____ Telephone: _____	_____	_____

OTHER NAMES/TITLES	MAILING ADDRESS	WORKSHOP	BANQUET
10. _____ _____ (Head Chaperone)	_____ _____ Telephone: _____ _____ (Event)	_____	_____
11. _____ _____ (Title)	_____ _____ Telephone: _____ _____ (Event)	_____	_____
12. _____ _____ (Title)	_____ _____ Telephone: _____ _____ (Event)	_____	_____
13. _____ _____ (Title)	_____ _____ Telephone: _____ _____ (Event)	_____	_____
14. _____ _____ (Title)	_____ _____ Telephone: _____ _____ (Event)	_____	_____
15. _____ _____ (Title)	_____ _____ Telephone: _____ _____ (Event)	_____	_____
16. _____ _____ (Title)	_____ _____ Telephone: _____ _____ (Event)	_____	_____
17. _____ _____ (Title)	_____ _____ Telephone: _____ _____ (Event)	_____	_____

Attach additional sheet if more space is needed.

FINANCIAL SUMMARY

REGISTRATION FEES

Contestants — \$70.00 x _____ (number) = \$ _____
 Non-contestants — \$90.00 x _____ (number) = \$ _____

SUBMITTED BY: _____ **TOTAL DUE \$** _____

Checks should be made payable to **PURDUE UNIVERSITY**. Please pay upon arrival.

Return this form to Roger Tormoehlen, Youth Development and Agricultural Education Dept., Purdue University, 615 W. State Street., West Lafayette, IN 47907-2053 by **September 15, 2009**.