



TARC 2014 Application Packet

Read the Contest Rules at www.rocketcontest.org before you begin.

ALL INFORMATION REQUESTED ON THE APPLICATION IS REQUIRED.

The Team America Rocketry Challenge is open to the first 1,000 teams that submit a completed application, including payment, **postmarked no later than November 30, 2013**. Teams must be made up of a minimum of 3 and no more than 10 students who are currently enrolled in grades 7 through 12 in U.S. schools. Team applications must come from a single school, home school association, or U.S. incorporated non-profit youth organization (excluding National Association of Rocketry, Tripoli Rocketry Association, or any other rocketry organization). **No more than five teams may be entered by any school or sponsoring organization.**

Our primary communication with teams is via email. It is your responsibility to provide us with as many valid email addresses as possible to ensure you receive information in a timely manner. Each registered team is required to designate a Student Program Manager as an additional point of contact for all TARC communications. This person will serve as a team leader and will be a main point of contact should any administrative team issues arise.

The official electronic forum (NARTARC Forum) for exchanging information with teams and NAR mentors is located at <http://groups.yahoo.com/group/NARTARC/> and requires a Yahoo email address (www.yahoo.com). We strongly recommend all teams establish an email account for their team at Yahoo, provide it in the email addresses section on your application, and join the Forum.

The \$125 registration fee **MUST** be included with the payment form and can only be paid by check, money order, VISA, MasterCard, or America Express. **We DO NOT accept purchase orders or issue invoices.**

Complete one application per team and mail in a 9 X 12 envelope (*please do not fold documents*). If you have more than one team please mail all team applications together in one envelop. **Incomplete or illegible applications will not be processed and will be returned.** This year's application is equipped with the capability to enter information directly into the PDF formatted application forms. **We strongly recommend** you utilize this feature to avoid delays in processing illegible applications.

After your application is processed, your team will receive a confirmation email with important information. If you do not receive a registration confirmation email within a week of submitting your application please email us at rocketcontest@aia-aerospace.org and let us know.

Mail your application to:

**Aerospace Industries Association
Attn: Team America Rocketry Challenge
1000 Wilson Boulevard, Suite 1700
Arlington, Virginia 22209**

** All sales are final. You will be responsible for all charges incurred, including payment for any goods and/or services. If you are under 18 years old, you may participate only with the approval of a parent or guardian.*

***The Supervising Teacher/Adult must complete and sign the teacher/adult agreement form stating that they understand the students are responsible for the creation, design, and flight of the rocket without the assistance of any other adult, teacher, or non-member of the team.*

**** AIA will not accept copies or faxes of the application. Please make a copy of your application for your records. Application must be postmarked by November 30, 2012.*

*****The Aerospace Industries Association reserves the right to make all last and final contest determinations.*

TARC 2014 Supervising Teacher/Adult Application Checklist

To ensure your application is processed as quickly as possible, complete this checklist.

The application is legible and complete. Note: Illegible and incomplete applications will not be processed, will be returned to you, and may jeopardize your chances of competing in this year's competition.

All information submitted is true to the best of my knowledge.

I have read and understand the rules and the Frequently Asked Questions posted at www.rocketcontest.org.

The Supervising Teacher/Adult Agreement Form is completely filled out and is signed.

A Parent Consent Form for each team member is attached.

A check or money order for \$125 payable to Aerospace Industries Association is attached to the payment form, or if paying by credit card, please check the appropriate box and be sure to include a correct email address.

I have made and retained a copy of all the application forms (Application Checklist, Payment Form, Copy of General Information, Team Member Information, Supervising Teacher/Adult Agreement Form, and the Parent Consent Forms) for my records.

The checklist is completed and signed.

Supervising Teacher/Adult Name: _____

Signature: _____ Date: _____

IMPORTANT: THE FORMS MUST BE IN THE FOLLOWING ORDER

Application Checklist
General Information Form
Team Member Information Form
Payment Form
Supervising Teacher/Adult Agreement Form
Parent Consent Forms

MAIL THEM IN A 9" X 12" ENVELOPE TO:

(if you have multiple teams please mail all applications in one envelope)

AEROSPACE INDUSTRIES ASSOCIATION
ATTN: TEAM AMERICA ROCKETRY CHALLENGE
1000 WILSON BLVD., SUITE 1700
ARLINGTON, VA 22209

TARC 2014 General Team Information

School or Organization Information

Tell us a little bit about the school or organization that your team represents

School or Organization:

Address 1:

Address 2:

City:

State:

Zip:

Supervising Teacher/Adult Information

Please fill out the following information about the awesome adult supervisor for your team

First Name:

Last Name:

Phone Number (with area code):

Mobile Phone Number (with area code):

Primary Email:

Alternate Email:

Team Information: *Tell us a little about your team*

Team Name:

Team Email:

Do you have a team Website, twitter, facebook, blog?
Have any of the above? We want to know!

Tell us a unique fact about your team:
We use these facts to help fuel media stories about your team:

Is anyone on your team a member of the NAR?

Yes

No

Has your school/organization competed in a previous TARC?

No. We are competing for the first time!

2013 2007
2012 2006
2011 2005
2010 2004
2009 2003
2008

Has your school/organization compete in previous TARC finals?

Not yet, but we hope to be there this year!

2013 2007
2012 2006
2011 2005
2010 2004
2009 2003
2008

TARC 2014 Member Information (3 minimum, 10 maximum)

Team Member 1 Student Program Manager/Team Captain			
Name:	Email:		
Grade:	Age:		
Gender: Male Female	Home Zip Code:		
Ethnicity (optional):	White	African American	Hispanic
	Asian	Pacific Islander	American Indian
Team Member 2			
Name:	Email:		
Grade:	Age:		
Gender: Male Female	Home Zip Code:		
Ethnicity (optional):	White	African American	Hispanic
	Asian	Pacific Islander	American Indian
Team Member 3			
Name:	Email:		
Grade:	Age:		
Gender: Male Female	Home Zip Code:		
Ethnicity (optional):	White	African American	Hispanic
	Asian	Pacific Islander	American Indian
Team Member 4			
Name:	Email:		
Grade:	Age:		
Gender: Male Female	Home Zip Code:		
Ethnicity (optional):	White	African American	Hispanic
	Asian	Pacific Islander	American Indian
Team Member 5			
Name:	Email:		
Grade:	Age:		
Gender: Male Female	Home Zip Code:		
Ethnicity (optional):	White	African American	Hispanic
	Asian	Pacific Islander	American Indian

TARC 2014 Member Information Continued

Team Member 6			
Name:		Email:	
Grade:		Age:	
Gender:	Male Female	Home Zip Code:	
Ethnicity (optional):	White	African American	Hispanic
	Asian	Pacific Islander	American Indian
Team Member 7			
Name:		Email:	
Grade:		Age:	
Gender:	Male Female	Home Zip Code:	
Ethnicity (optional):	White	African American	Hispanic
	Asian	Pacific Islander	American Indian
Team Member 8			
Name:		Email:	
Grade:		Age:	
Gender:	Male Female	Home Zip Code:	
Ethnicity (optional):	White	African American	Hispanic
	Asian	Pacific Islander	American Indian
Team Member 9			
Name:		Email:	
Grade:		Age:	
Gender:	Male Female	Home Zip Code:	
Ethnicity (optional):	White	African American	Hispanic
	Asian	Pacific Islander	American Indian
Team Member 10			
Name:		Email:	
Grade:		Age:	
Gender:	Male Female	Home Zip Code:	
Ethnicity (optional):	White	African American	Hispanic
	Asian	Pacific Islander	American Indian

TARC 2014 Payment Form

Purchaser is responsible for all of the non-refundable incurred charge. Payment for one team only must be submitted with each application. By submitting the application you accept this non-refundable fee. **WE DO NOT PROVIDE INVOICES OR ACCEPT PURCHASE ORDERS.**

Registration fee = \$125.00

PAYMENT CAN BE MADE BY: Check, Money Order or Credit Card

Check

Money Order

Check# _____

Check Amount \$ _____

(Make checks and money orders payable to: Aerospace Industries Association)

If paying by credit card, please check the box below and provide an email address for the Supervising Teacher/Adult.

Once your application is received, a link to a secure payment page will be sent to this email address and you will be able to pay on-line.

Once you have made payment on-line, your application will then be processed and your team registration completed. You will then receive the Registration Confirmation Email.

I would like to pay by Credit Card. Please email payment information to the address below.

Email Address: _____

NOTE: Billing via credit card will appear on your credit card statement as "AIA Internet Account."

Paper Clip Check Here

(Do not staple or tape)

TARC 2014 Supervising Teacher/Adult Agreement Form

I understand that the students on my team are responsible for the creation, design, and flight of the rocket without the assistance of any other adult, teacher, or non-member of the team.

By signing this form I agree to supervise the team from:

School/Organization Name: _____

City: _____ State: _____ Zip Code _____

I acknowledge that it is my responsibility to make sure that Aerospace Industries Association receives all updated contact and student information.

I understand that the Aerospace Industries Association has the right to make all last and final contest determinations and that the application fee is non-refundable.

I have read and understand all of the rules of the contest.

All information submitted is true to the best of my knowledge.

Supervising Teacher/Adult Name: _____

Title/Affiliation with School or Organization: _____

Signature: _____ Date: _____

School/Organization Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

TARC 2014 Parent/Guardian Consent & Release Form

A form must be completed for each student participant. Application will not be processed without receipt of all students' Parent/Guardian Consent Forms. It must be typed, or printed legibly. This section is to be completed and signed by a Parent or Guardian. If the student is 18 years of age or over they should complete and sign the form themselves.

I authorize my child (Full Name of Child), _____
to participate in the Team America Rocketry Challenge.

He/She attends _____ (school)

I certify that my son/daughter is in _____ grade and is _____ years old.

I hereby release Aerospace Industries Association and/or National Association of Rocketry and their respective member companies, affiliates, Board of Governors/Trustees, licensees and assigns from all claims, demands, liabilities, damages, costs and expenses that I may now or hereafter have against Aerospace Industries Association and/or National Association of Rocketry arising in connection with student's participation in the Team America Rocketry Challenge.

I hereby grant to Aerospace Industries Association and/or National Association of Rocketry and their respective member companies, affiliates, Board of Governors/Trustees, licensees and assigns the right to photograph and/or videotape and use the videotape and/or photograph of the below named student during participation in any events related to the Team America Rocketry Challenge and the right to use this media without further compensation to me or student or any limitation whatsoever.

Parent/Guardian Name: _____

Signature: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

Day: _____ Evening: _____ Mobile: _____

Email: _____

Supervising Teacher/Adult: _____

Organization/SchoolName: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____