

2008 **FIRST LEGO®** League  
 Indiana Championship Tournament  
*Indiana University – Purdue University*  
 Fort Wayne  
 2101 E. Coliseum Blvd.  
 Fort Wayne, Indiana 46805

**REGISTRATION  
FORM**



2008 **FIRST LEGO®** League Indiana Championship Tournament: Saturday, December 13, 2008  
 Tournament Fee - \$35 for first team, each additional team \$30  
**Submit this form by December 12, 2008** even if you are paying on the day of the tournament.  
 Optional: DVD of Championship Tournament held in the IPFW Gates Sports Center

**Team Contact:** \_\_\_\_\_ **Phone:** (    ) \_\_\_\_\_ **Email:** \_\_\_\_\_

**FLL Team Number**

**Team Name**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Registration Fee:**

**\$35 - first team**

**1 team at \$35    \$ \_\_\_\_\_**

**\$30 - each additional team from same organization**

**\_\_\_\_\_ teams X \$30    \$ \_\_\_\_\_**

**DVD copy of FLL Competition:**

**SPECIAL OFFER:**

Each team is entitled to one copy of the video at the cost of \$15

(Additional \$5 is paid by ITT)      **Number of teams**      \_\_\_\_\_ X \$15      \$ \_\_\_\_\_

(Additional \$5 is being paid for by ITT)

**All other copies - \$20 per copy**      \_\_\_\_\_ X \$20      \$ \_\_\_\_\_

**Total Amount Due:**      \$ \_\_\_\_\_

**A copy of this invoice must be mailed or faxed back to IPFW by December 12, 2008.**

**A copy of the invoice must be returned even if you are planning to pay at registration. Invoices may be faxed to (260) 481-5734**

<b>Please select payment Option</b>	
<input type="checkbox"/> <b>Pay in advance.</b> Complete section I. Complete section II as well, if planning to order video tapes.	<input type="checkbox"/> <b>Pay at registration.</b> Complete section II only if planning to order video tapes.
<p style="text-align: center;"><b>I. METHOD OF PAYMENT</b></p> _____ PO Number: _____ _____ Cash/Check _____ VISA    _____ MASTERCARD    _____ DISCOVER Account # _____ Expiration date (MM/YY) _____ Signature _____	<p style="text-align: center;"><b>II. TAPES SHOULD BE MAILED TO</b></p> Name: _____ Address: _____ _____ City: _____ State: _____ Zip: _____ Daytime Telephone (    ) _____

Make all checks payable to **IPFW FIRST LEGO® League**. (Don't forget to include this invoice with your FLL team number, the number of copies you would like of the video tape, the total amount, and the address where the tape(s) should be mailed.) If you have any questions concerning this invoice, contact Randi Boyd, (260) 481-4145, [boydrs@ipfw.edu](mailto:boydrs@ipfw.edu)

**If paying in advance, please return checks along with this completed invoice to:  
 IPFW, Randi Boyd - ET 243, 2101 E. Coliseum Blvd. Fort Wayne, IN 46805. Thank you!**