

APPLICATION FORM

**The 18th Annual Intelligent Ground Vehicle Competition
At Oakland University in Rochester, Michigan
June 4 - 7, 2010**

College/University: _____

School Street Address: _____

School City, State/Province: _____

School Zip Code/Country: _____

Faculty Advisor: _____

Faculty Telephone Number: _____

Faculty E-mail: _____

Student Team Leader (**one name**): _____

Student Telephone Number: _____

Student E-mail: _____

Name of Vehicle (**Mandatory**): _____

Team Members: _____

(This Application Must Be Typed)

List of Sponsors (others may be added at a later date): _____

Brief Description of Vehicle: _____

I certify that all team members are students of above named school.

Faculty Supervisor (Printed): _____

Faculty Supervisor Signature: _____

Each application must include \$250.00 (US) registration fee (non-refundable), **checks only**, made payable to Oakland University.

Event will take place Rain or Shine.

Please return the APPLICATION FORM and the WAIVER OF CLAIMS (may be turned in at the time of competition) **postmarked by February 28, 2010 to:**

Gerald C. Lane
C/O Dr. Ka C. Cheok
102G SEB
SECS-ESE Dept.
Oakland University
Rochester, MI 48309-4478

(This Application Must Be Typed)