



ROBOFEST 2023 International Site Host Application

Please email this completed form to: LTU - Robofest Coordinator

Shannan Palonis - spalonis@ltu.edu



If you have questions about completing this form, please email or call: 248-204-3568

| | | | | |
|---|--|---|---|--|
| Registration/Fee System Options | Which option do you select from "Robofest International Site Host Registration and Fee Options"? * | | | |
| | [] Opt 1 | [] Opt 2 | [] Opt 3 | |
| Online or In-Person Competition Date: | | Video Submission Due Date: | | |
| Competition Start Time: <i>Team check-in should begin 30-60 mins prior</i> | | Competition End Time: | | |
| Site Host Organizer Information (Main contact for event planning and coordination) *Required Fields | Contact Name & Title* | | | |
| | Organization Name* | | | |
| | Address* | | | |
| | City, State/Province, Code* | | | |
| | E-mail address* | | | |
| | Primary Phone* | | | |
| | Alternate Phone | | | |
| | Organization Website URL | | | |
| | Individual who will sign participant certificates* | Name: | | |
| | | Job Title: | | |
| Scanned Signature File will be provided* | <input type="checkbox"/> YES <input type="checkbox"/> NO (Certificates will be signed by hand) <input type="checkbox"/> File has already been provided | | | |
| Host Logos | Logos (up to 2) will be provided | For: <input type="checkbox"/> Host Organization <input type="checkbox"/> Venue <input type="checkbox"/> None (LTU Default) | | |
| Site Check-In Fee | Will you collect a separate Site Check-In Fee from each registered team to defray your costs? <input type="checkbox"/> NO <input type="checkbox"/> YES - how much? (We recommend no more than USD \$20) _____ | | | |
| Competition Categories & Maximum # of teams to accommodate Please note that online events must be limited to 1 Category per session | Jr Exhibition (5th – 8th grade) # of Teams: _____ | Jr Game (5th – 8th grade) of Teams: _____ | Jr BottleSumo (5th – 8th grade) # of Teams: _____ | |
| | Sr Exhibition (9th – 12th grade) # of Teams: _____ | Sr Game (9th – 12th grade) of Teams: _____ | Sr BottleSumo (9th – 12th grade) <input type="checkbox"/> CL <input type="checkbox"/> UL #of Teams: _____ | |
| | Jr UMC (5th – 8th grade) # of Teams: _____ | Jr RoboArts (5th – 8th grade) # of Teams: _____ | RoboParade (4th – 8th grade) # of Teams: _____ | |
| | Sr UMC (9th – 12th grade) # of Teams: _____ | Sr RoboArts (9th – 12th grade) # of Teams: _____ | | |
| | | | | |
| | | | | |
| Online Platform Information (Online only) | Online Platform | | | |
| | Level of Assistance Needed from Robofest Office | <input type="checkbox"/> No assistance needed from Robofest <input type="checkbox"/> Robofest to Host Zoom Webinar (Host only) <input type="checkbox"/> Robofest to Host Zoom Webinar and provide Production Assistance | | |
| In-Person Venue Information (In-Person Only) <input type="checkbox"/> Same as Site Host Organization (skip to next section) <input type="checkbox"/> other (go to) | Venue Name | | | |
| | Venue Street Address | | | |
| | City, State/Province, Code | | | |
| | Venue Contact Name & Title | | | |
| | Venue Phone | | | |
| | Venue Website URL | | | |
| Ship Supplies to: <input type="checkbox"/> Site Host <input type="checkbox"/> Venue <input type="checkbox"/> 3 rd location (go to) | Event Supplies will be shipped via UPS Or USPS Priority (NO PO Boxes) | Contact Location | | |
| | | Shipping Address: City, St/Prov Code: Phone Number: | | |