

BEST Medicine Engineering Fair Online Registration

Note: Please enter correct email addresses since these are used for communication regarding the event.

Are you an Individual or Team Project?

Student/Team Leader (Member #1)

First Name:

Last Name:

Grade Level:

Gender:

Student T-shirt Size:

- 1) Youth M (Chest 28-30)
- 2) Youth L (Chest 30-32)
- 3) Youth XL (Chest 32-35)
- 4) Adult S (Chest 35-37)
- 5) Adult M (Chest 38-40)
- 6) Adult L (Chest 41-43)
- 7) Adult XL (Chest 44-46)
- 8) Adult XXL (Chest 47-49)

Box lunch selection (select one for you and your parent):

- 1) Ham
- 2) Turkey
- 3) Vegetarian

Student E-mail (Optional):

Parent First Name:

Parent Last Name:

Parent E-mail:

Phone:

Street:

City:

State:

Zip Code:

Team Member #2 First Name:

Team Member #2 Last Name:

Team Member #2 Gender:

Team Member #2 T-shirt Size:

- 1) Youth M (Chest 28-30)
- 2) Youth L (Chest 30-32)
- 3) Youth XL (Chest 32-35)
- 4) Adult S (Chest 35-37)
- 5) Adult M (Chest 38-40)
- 6) Adult L (Chest 41-43)
- 7) Adult XL (Chest 44-46)
- 8) Adult XXL (Chest 47-49)

Box lunch choices (select one for you and one for your parent):

- 1) Ham
- 2) Turkey
- 3) Vegetarian

Team Member #2 Email

Team Member #2
Parent First Name:

Parent Last Name:

Parent E-mail:

Phone:

Street:

City:

State:

Zip Code:

Team Member #3 First Name:

Team Member #3 Last Name:

Team Member #3 Gender:

Team Member #3 T-shirt Size:

- 1) Youth M (Chest 28-30)
- 2) Youth L (Chest 30-32)
- 3) Youth XL (Chest 32-35)
- 4) Adult S (Chest 35-37)
- 5) Adult M (Chest 38-40)
- 6) Adult L (Chest 41-43)
- 7) Adult XL (Chest 44-46)
- 8) Adult XXL (Chest 47-49)

Box lunch choices (select one for you and one for your parent):

- 1) Ham
- 2) Turkey

3) Vegetarian

Team Member #3

Parent First Name:

Parent Last Name:

Parent E-mail:

Phone:

Street:

City:

State:

Zip Code:

Team Member #4 First Name:

Team Member #4 Last Name:

Team Member #4 Gender:

Team Member #4 T-shirt Size:

- 1) Youth M (Chest 28-30)
- 2) Youth L (Chest 30-32)
- 3) Youth XL (Chest 32-35)
- 4) Adult S (Chest 35-37)
- 5) Adult M (Chest 38-40)
- 6) Adult L (Chest 41-43)
- 7) Adult XL (Chest 44-46)
- 8) Adult XXL (Chest 47-49)

Box lunch choices (select one for you and one for your parent):

- 1) Ham

2) Turkey

3) Vegetarian

Team Member #4

Parent First Name:

Parent Last Name:

Parent E-mail:

Phone:

Street:

City:

State:

Zip Code:

School Name:

Teacher First Name:

Teacher Last Name:

Teacher E-mail:

School Phone (Optional):

School Address:

School County:

Did your school host an engineering fair?

Did you participate in your school's engineering fair?

If you have previously participated in the BEST Medicine Engineering Fair, how have you benefited from your experience?

Title of Project:

Project Category:

Choose one of the following: Biomaterials/Polymer Medicine; Cardiovascular/Soft Tissue Wound Healing; Clinical Trials; Health/Medicine; Medical Device;

Modeling/Simulation/Medical IT; Musculoskeletal; Sensors/Imaging; Value-driven Engineering.

Is your engineering fair project a continuation of a previous year's project?

To complete your registration, please select one of the following Paths to BEST Medicine:

Path 1: I received a letter from the Chair or Co-Chair of BEST Medicine.

Path 2: I did an independent project and wish to participate.