



UK Aerospace Youth Rocketry Challenge
www.UKAYRoC.org.uk

Document Ref:	UKAYRoC/2007 Application Form/Reference/Doc
Date Issued:	2 nd November 2006
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2007 Application Packet

Read the Contest Rules and Frequently Asked Questions at www.UKAYRoC.org.uk before you begin.

ALL INFORMATION REQUESTED ON THE APPLICATION IS REQUIRED.

The UK Aerospace Youth Rocketry Challenge (UKAYRoC) is open to the first 40 teams that submit a completed application, including payment, postmarked no later than December 1, 2006. Teams must be made up of a minimum of 3 and no more than 5 students who are currently enrolled in grades 7 through 13 in a UK school. Team applications must come from a single school or single UK incorporated non-profit youth organization (excluding UK Rocketry Association or any other rocket club organization). **No more than three teams may be entered by any school or sponsoring organization.**

**** 2007 Team Entries are limited to 40**** **DO NOT WAIT to send in your registration.**

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 UKAYRoC communications. This person will serve as a team leader and will be a main point of contact should any administrative team issues arise.

The **£100** registration fee **MUST** be included with the payment form and can only be paid by cheque. We **DO NOT** accept purchase orders or issue invoices.

Complete one application per team and mail in a 9 X 12 envelope or an overnight delivery package (*please do not fold documents*). **Incomplete or illegible applications will not be processed and will be returned.**

After your application is processed, your team will be listed as a “Registered Team,” and a registration confirmation email with very important information will be sent to all the email addresses listed on your application. If you do not receive a registration confirmation email within 24 hours of your team being listed on our website, it probably means your email address is invalid or we have incorrectly entered it into our database.

Mail or overnight your application to: **Space Connections**
Angel Way
Bradford
West Yorkshire
BD7 1BX
Attn: UKAYRoC

** 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.*





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2007 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.UKAYRoC.org.uk

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

A Parent Consent Form for each team member is attached.

A cheque for £100 is attached to the payment form.

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
 Payment Form
 General Information Form
 Team Member Information Form
 Supervising Teacher/Adult Agreement Form
 Supervising Teacher/Adult Passport Photos x 2
 Parent Consent Forms

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

Space Connections
Angel Way
Bradford
West Yorkshire
BD7 1BX
Attn: UKAYRoC





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2007 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 = £100.00

PAYMENT CAN BE MADE BY: Cheque

Cheque

Cheque# _____ Amount £ _____
 (Make cheques payable to: Space Connections)

Attach Cheque Here

Please Attached 2 Passport Photos for the Teacher/Adult Supervisor for UKRA Membership Here



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General Information

School/Organization Name: _____

Address 1: _____

Address 2: _____

City: _____ County: _____ Post Code _____

School/Organization Website URL: _____

Supervising Teacher/Adult Information

First Name: _____ Last Name: _____

Work Phone Number (with area code): _____

Home Phone Number (with area code): _____

Mobile Phone Number (with area code): _____

Supervisor's Primary Email: _____

Supervisor's Alternate Email: _____

Experience

Average Team Experience Level (1 = beginner, 10 = experienced): _____

Is anyone on your team a member of UKRA? Yes No

UKRA Members Number and Name(s): _____





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Team Member Information (3 minimum, 5 maximum)

1. **Student Program Manager (**REQUIRED**):** _____

Male Female E-Mail Address: _____ Year: _____

2. Name: _____

Male Female E-Mail Address: _____ Year: _____

3. Name: _____

Male Female E-Mail Address: _____ Year: _____

4. Name: _____

Male Female E-Mail Address: _____ Year: _____

5. Name: _____

Male Female E-Mail Address: _____ Year: _____

6. Name: _____

Male Female E-Mail Address: _____ Year: _____





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2007 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/Organisation Name: _____

City: _____ County: _____ Post 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 organisers have 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 Organisation: _____

Signature: _____ **Date:** _____

School/Organisation Name: _____

Address 1: _____

Address 2: _____

City: _____ **County:** _____ **Post Code:** _____





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2007 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 authorise my child (Full Name of Child), _____ to participate in the UKAYRoC.

He/She attends _____ (school)

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

I hereby release Tri Polus Ltd, Space Connections and/or UK Rocketry Association 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 Tri Polus Ltd, Space Connections and/or UK Rocketry Association arising in connection with student's participation in the UKAYRoC.

I hereby grant to Tri Polus Ltd, Space Connections and/or UK Rocketry Association 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 UKAYRoC 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: _____ **County:** _____ **Post Code:** _____

Day: _____ **Evening:** _____ **Mobile:** _____

Email: _____

Supervising Teacher/Adult: _____

Organisation/School Name: _____

Address 1: _____

Address 2: _____

City: _____ **County:** _____ **Post Code:** _____

