



Pre-Registration Instructions

I. Common Information

a. All attendees will fill out the “Common Information” page of the form, requiring the following information

- i. First Name
- ii. Last Name
- iii. Email Address
- iv. Phone Number
- v. Date of Birth
- vi. Gender
- vii. Ethnicity
- viii. T-Shirt Size
- ix. Tripoli Number
- x. Tripoli Certification Level
- xi. City (That you are from)
- xii. State/Province
- xiii. Country
- xiv. Emergency Contact Name
- xv. Emergency Contact Relationship
- xvi. Emergency Contact Phone Number
- xvii. Attendee Category (i.e., Student, Volunteer, etc)
 1. NOTE: If you are a volunteer and another category like FoR, please choose Volunteer first, there will be another option to select your second category later

II. Students

- a. Team Number/Name (PLEASE DOUBLE CHECK, CRITICAL INFORMATION)
- b. Major

- c. Are you a part of a recovery team?
- d. Are you the team lead? (One per team)

III. Student Leads

- a. Who is your FoR?
- b. What is your preferred time frame for registration day?
 - i. Early Morning
 - ii. Mid-day
 - iii. Afternoon
- c. What is your second preferred time frame for registration day?
- d. What is your third preferred time frame for registration day?
- e. How many students are attending from your team?

IV. Volunteers

- a. What team(s) are you a part of?
- b. Position (If you do not have a specific "Role" please choose "Volunteer")
- c. Are you apart of another category? Please select below

V. FoR/Advisor/Mentor

VI. Spectator

VII. Sponsor/Vendor/Press

VIII. WAIVER

- a. All attendees must fill out the Liability waiver, if you do not complete sign this waiver your registration will be rejected
- b. Waiver is split into three questions
 - i. Waiver Part (1/2) Requiring Text Signature
 - ii. Waiver Part (2/2) Requiring Text Signature
 - iii. Having read the above, please indicate whether you "Agree" or "Disagree" to the above Terms and Conditions and submit. Please select to print a copy of your response once it is complete for your records.
- c. To copy your response for your record:
 - i. After clicking "Submit" select the following:



Your response was submitted.


Important thing you can do next

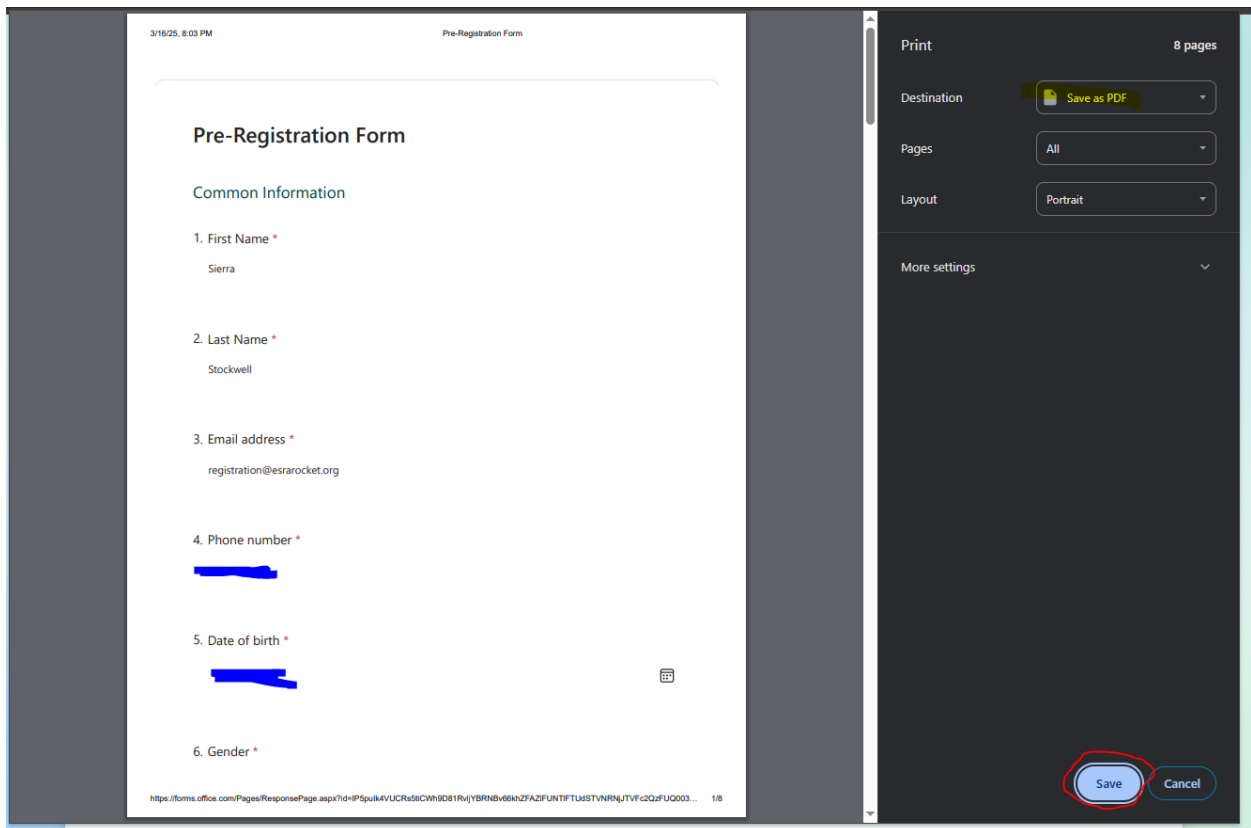
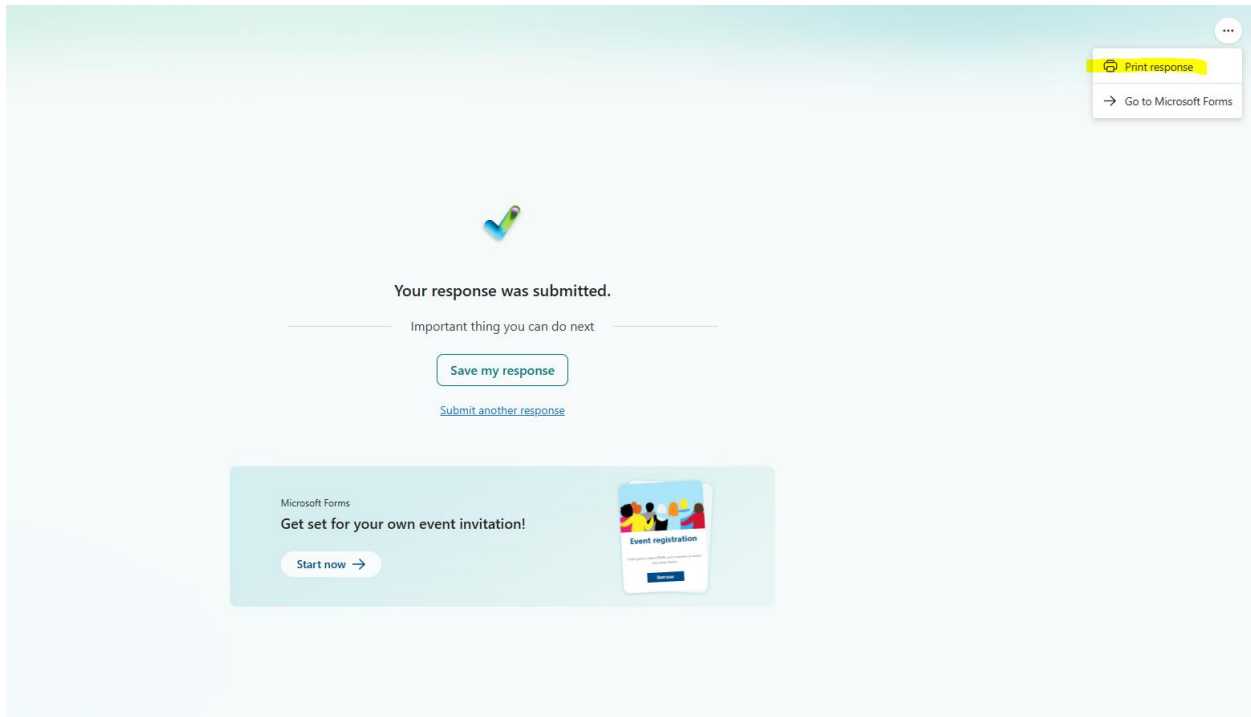
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Please contact registration@esrocket.org if you have any questions or concerns.