

**2019 WORCESTER REGIONAL MIDDLE SCHOOL SCIENCE & ENGINEERING FAIR (WRSEF)**

**WORCESTER REGIONAL FAIR DATE: MAY 3, 2019  
REGION II REGISTRATION FORM**

**Attach All Approved RSRC Forms (1A, 1B and, if necessary, C and D)  
Retain copy of this application and any accompanying material for your records.  
Registration Deadline: April 15, 2019 (for Worcester Regional Fair)**

**Student Section: Please Print Neatly**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Grade \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male \_\_\_ Female \_\_\_ Home Phone \_\_\_\_\_

Street Address \_\_\_\_\_

City / Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent Email: \_\_\_\_\_

Will you need an electrical outlet for your project display or laptop computer at the fair? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

If YES, bring a heavy-duty/3-pronged extension cord.

**\*\*Note: you will receive less than the 40 inches of table space due to the high number of electricity projects**

**Parent/Guardian Signature** \_\_\_\_\_

\*Includes acknowledgment of your child's project safety approval and permission to participate in Regional and State Science Fairs.

- I grant permission to WRSEF & MSSEF for the release of my child's photograph or video for promotional or informational activities of the State and Regional Science Fairs. **Yes** \_\_\_\_\_ **No** \_\_\_\_\_
- I grant permission to WRSEF & MSSEF to release my child's full name, school name, and project title, along with information related to my child's project, for various media (including Internet, electronic, and written media) purposes. *Please also note that regardless of whether you sign this release statement, each participating student's name, school, and project title will be printed in the MSSEF Middle School Program booklet.* **Yes** \_\_\_\_\_ **No** \_\_\_\_\_
- I agree to release WRSEF & MSSEF from all claims and liability related to the aforementioned material. **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_

**School Section: Please Print**

The project has received RSRC approval and I understand the rules of the WRSEF & MSSEF Middle School Division and certify that this student project complies with all state and federal safety regulations.

Teacher's Name \_\_\_\_\_ Teacher's Signature \_\_\_\_\_

School Name \_\_\_\_\_

School Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School Phone # \_\_\_\_\_ Teacher's Active Email \_\_\_\_\_

**All correspondence is done via e-mail through the teacher**

**Project Section: Please Print**

(Check One) Individual Project \_\_\_\_\_ Team Project \_\_\_\_\_

**Registration Form must be completed for each student in a team.**

If team project, please list names of other students. (Maximum of **three** students per team.)

2. \_\_\_\_\_ 3. \_\_\_\_\_

Project Title \_\_\_\_\_

*MSSEF, Inc., shall not be responsible for the loss, theft, or damage to exhibits.*

**Mail Registration Form and all Research Forms by April 1' , 201+ to:**

**Lisa Greenwald  
379 Cross Street  
Boylston, MA 01505**