

Entry form for 2010 Heavy Lift Challenge

Note: Please copy this form and complete one form per team entered

Name of university or school: _____
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Names of team: _____

Names and contact addresses of:

Team manager (include e-mail addresses and telephone numbers, please): _____

All correspondence relating to the 2010 Challenge will be conducted through the addresses and numbers given on this form.

Do you require technical assistance from local aeromodellers?
YES/NO

Do you require pilots? YES/NO

Preferred channel number (35MHz band) _____

2.4 GHz equipment to be used? YES/NO
